

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Wenstrup for Congress

ADDRESS (number and street)

PO Box 9551

Check if different than previously reported. (ACC)

Cincinnati

OH

45209-0551

2. FEC IDENTIFICATION NUMBER ▼

C C00497818

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OH

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

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

Election on

M M / D D / Y Y Y Y  
11 / 04 / 2014

in the State of

OH

5. Covering Period

M M / D D / Y Y Y Y  
10 / 16 / 2014

through

M M / D D / Y Y Y Y  
11 / 24 / 2014

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

Type or Print Name of Treasurer Robert E. Carroll

Signature of Treasurer Robert E. Carroll

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
12 / 04 / 2014

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Wenstrup for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	60465	1115240.99
(b) Total Contribution Refunds (from Line 20(d)) .....	500	1250
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	59965	1113990.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	27644.02	828702.87
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	350.31
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	27644.02	828352.56
8. Cash on Hand at Close of Reporting Period (from Line 27).....	345422.39	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	52500	

**For further information contact:**

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

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

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name  
**Wenstrup for Congress**

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

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date after general election)  through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="24650"/>	<input type="text" value="566780.76"/>	<input type="text" value="500"/>
(ii) Unitemized		
<input type="text" value="6065"/>	<input type="text" value="111117.35"/>	<input type="text" value="100"/>
(iii) Total of contributions from individuals		
<input type="text" value="30715"/>	<input type="text" value="677898.11"/>	<input type="text" value="600"/>
(b) Political Party Committees		
<input type="text" value="0"/>	<input type="text" value="1000"/>	<input type="text" value="0"/>
(c) Other Political Committees		
<input type="text" value="29750"/>	<input type="text" value="436342.88"/>	<input type="text" value="0"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 50

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
60465	1115240.99	600
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0	0	0
(b) All Other Loans		
0	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0	350.31	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0	0.98	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
60465	1115592.28	600

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 50

Write or Type Committee Name

Wenstrup for Congress

 Report Covering the Period: From:  /  /  To:  /  / 
**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
<input type="text" value="27644.02"/>	<input type="text" value="828702.87"/>	<input type="text" value="9479.14"/>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0"/>	<input type="text" value="10000"/>	<input type="text" value="0"/>
(b) Of All Other Loans		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0"/>	<input type="text" value="10000"/>	<input type="text" value="0"/>
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="500"/>	<input type="text" value="1250"/>	<input type="text" value="0"/>
(b) Political Party Committees		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 50

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0

0

0

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

500

1250

0

**21. OTHER DISBURSEMENTS**

2000

47600

0

**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

30144.02

887552.87

9479.14

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

59965.00

1113990.99

600.00

**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

27644.02

828352.56

9479.14

**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

315101.41

24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....

60465

25. SUBTOTAL (add Line 23 and Line 24).....

375566.41

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

30144.02

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)

345422.39

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steven Ortner**

Mailing Address 7511 Ayers Road

City State Zip Code  
Cincinnati OH 45255-3914

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

Name of Employer Occupation  
Ohio Valley Electrical Svcs Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 17 / 2014

**Transaction ID : A-CF5985**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Howard Bell**

Mailing Address 6690 Morgans Run Road

City State Zip Code  
Loveland OH 45140-7205

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

Name of Employer Occupation  
Cincinnati Eye Physicians Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4225**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 18 / 2014

**Transaction ID : A-CF5958**

Amount of Each Receipt this Period  
**1600**

**C.** Full Name (Last, First, Middle Initial)  
**Pamela Bell**

Mailing Address 6690 Morgans Run Road

City State Zip Code  
Loveland OH 45140-7205

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

Name of Employer Occupation  
Cincinnati Eye Physician, Inc. Office Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4225**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 18 / 2014

**Transaction ID : A-CF5957**

Amount of Each Receipt this Period  
**1600**

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

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

**3300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald Hess**

Mailing Address 7155 Willoughby Court

City West Chester State OH Zip Code 45069-4666

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

Name of Employer Welling Orthopedic Occupation Orthopedic Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 19 / 2014

**Transaction ID : A-CF5959**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Sarah F. Fogarty**

Mailing Address 678 Stanley Avenue

City Cincinnati State OH Zip Code 45226-1939

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 20 / 2014

**Transaction ID : A-CF6004**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**David Beblo**

Mailing Address 9140 Whisperinghill Drive

City Cincinnati State OH Zip Code 45242-4661

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

Name of Employer Precision Alloy Services, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2014

**Transaction ID : A-CF6011**

Amount of Each Receipt this Period  
**100**

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

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

**3100.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan Blatt**

Mailing Address 3473 Principio Avenue

City State Zip Code  
Cincinnati OH 45208-4242

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

Name of Employer Occupation  
John Henry Homes Builder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2014

**Transaction ID : A-CF6042**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Robert M. Blatt**

Mailing Address 3944 Miami Road # 309

City State Zip Code  
Cincinnati OH 45227

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2014

**Transaction ID : A-CF6035**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**John C. Ernst Jr.**

Mailing Address 773 Oaklea Drive

City State Zip Code  
Tipp City OH 45371

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2014

**Transaction ID : A-CF6046**

Amount of Each Receipt this Period  
**500**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey Hock**

Mailing Address 2760 Grandin Road

City Cincinnati State OH Zip Code 45208-3415

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

Name of Employer Enerfab Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2014

**Transaction ID : A-CF6009**

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**Karen Hock**

Mailing Address 2760 Grandin Road

City Cincinnati State OH Zip Code 45208

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2014

**Transaction ID : A-CF6010**

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Humes**

Mailing Address 10123 Alliance Road Suite 100

City Blue Ash State OH Zip Code 45242-4714

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

Name of Employer Great Traditions Development Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2014

**Transaction ID : A-CF6041**

Amount of Each Receipt this Period  
 500

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 11 OF 50  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen R. Hunt**

Mailing Address 425 Walnut Street  
Suite 2200

City State Zip Code  
Cincinnati OH 45202

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

Name of Employer Occupation  
Aronoff, Rosen, and Hunt Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2014			

**Transaction ID : A-CF6038**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Amy Russert**

Mailing Address 1243 W Rookwood Drive

City State Zip Code  
Cincinnati OH 45208-3337

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2014			

**Transaction ID : A-CF6016**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Amy Russert**

Mailing Address 1243 W Rookwood Drive

City State Zip Code  
Cincinnati OH 45208-3337

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2014			

**Transaction ID : A-CF6017**

Amount of Each Receipt this Period  
**100**

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

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

**700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Todd Flagel**

Mailing Address 9251 Shallowcreek Drive

City Loveland State OH Zip Code 45140

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

Name of Employer Flagel & Papakirk Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2014

**Transaction ID : A-CF6015**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Matthew Luther**

Mailing Address 5400 Crooked Tree Drive

City Mason State OH Zip Code 45040-9663

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

Name of Employer Cintas Corporation Occupation Military Recruiting Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2014

**Transaction ID : A-CF6019**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**E. Michael Zicka**

Mailing Address 7861 E Kemper Road

City Cincinnati State OH Zip Code 45249

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

Name of Employer Zicka Homes Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2014

**Transaction ID : A-CF6022**

Amount of Each Receipt this Period  
**1000**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Doug Auxier**

Mailing Address 2698 Old State Route 32

City State Zip Code  
Batavia OH 45103

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

Name of Employer Occupation  
Auxier Gas President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 27 / 2014**

**Transaction ID : A-CF6023**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 5490 Windridge Court

City State Zip Code  
Cincinnati OH 45243-2967

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**0**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 27 / 2014**

**Transaction ID : A-CF6105**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Laura Pickard**

Mailing Address 1835 Culver Lane

City State Zip Code  
Glenview IL 60025-5033

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

Name of Employer Occupation  
Norridge Foot Clinic Podiatrist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 29 / 2014**

**Transaction ID : A-CF6050**

Amount of Each Receipt this Period  
**50**

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

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

**1050.00**

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

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

FOR LINE NUMBER: PAGE 14 OF 50  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Phillip E. Ward**

Mailing Address 2321 Timberlane Drive

City State Zip Code  
Florence SC 29506

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

Name of Employer Occupation  
C.C. Foot & Ankle Associates Podiatrist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 29 / 2014**

**Transaction ID : A-CF6051**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Brett Coldiron**

Mailing Address 3024 Burnet Avenue

City State Zip Code  
Cincinnati OH 45219-2420

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : A-CF6062**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Charles Gerhardt III**

Mailing Address 700 Walnut Street  
Suite 450

City State Zip Code  
Cincinnati OH 45202-2011

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

Name of Employer Occupation  
Government Strategies Group Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 01 / 2014**

**Transaction ID : A-CF6063**

Amount of Each Receipt this Period  
**500**

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

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

**1100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>Peter Kambelos</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 4767 N Bend Road		<b>Transaction ID : A-CF6060</b>
City Cincinnati	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Seven Medical Arts	Occupation Doctor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Martin Moran</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 515 Missouri Avenue		<b>Transaction ID : A-CF6064</b>
City Cincinnati	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Self-Employed	Occupation Salesman	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350	

Full Name (Last, First, Middle Initial) <b>Gary Osterfeld</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 6638 Wyndwatch Drive		<b>Transaction ID : A-CF6061</b>
City Cincinnati	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Mandaly Management LLC	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Canter**

Mailing Address 13 Cherokee Trail

City State Zip Code  
New Richmond OH 45157-9001

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

Name of Employer Occupation  
Environmental Engine President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		02		2014

**Transaction ID : A-CF6059**

Amount of Each Receipt this Period  
**150**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Corman**

Mailing Address PO Box 8099

City State Zip Code  
Cincinnati OH 45208-0099

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

Name of Employer Occupation  
UBS Financial Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		02		2014

**Transaction ID : A-CF6096**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**James Frey**

Mailing Address 2950 Observatory Ave.

City State Zip Code  
Cincinnati OH 45208-2412

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

Name of Employer Occupation  
Home Builders Association Homebuilder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		02		2014

**Transaction ID : A-CF6070**

Amount of Each Receipt this Period  
**500**

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

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

**750.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>David Groenke</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2014
Mailing Address 3912 Devonshire Drive		<b>Transaction ID : A-CF6074</b>
City Cincinnati	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750
Name of Employer Vorys Sater Seymour & Pease	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750	

Full Name (Last, First, Middle Initial) <b>Peter Iacobell</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2014
Mailing Address 6434 Katherine Manor Court		<b>Transaction ID : A-CF6058</b>
City Liberty Twp	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer UC Health	Occupation Healthcare Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375	

Full Name (Last, First, Middle Initial) <b>Barbara N. Juengling</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 02 / 2014
Mailing Address 8073 Ashley View Drive		<b>Transaction ID : A-CF6103</b>
City Cincinnati	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 18 OF 50  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul E. Keck Jr.**

Mailing Address 8395 Old Stable Road

City State Zip Code  
Cincinnati OH 45243-1441

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

Name of Employer Occupation  
Lindner Center of Hope President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2014**

**Transaction ID : A-CF6107**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Lindhorst**

Mailing Address 5660 Eaglesridge Lane

City State Zip Code  
Cincinnati OH 45230

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**325**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2014**

**Transaction ID : A-CF6086**

Amount of Each Receipt this Period  
**75**

**C.** Full Name (Last, First, Middle Initial)  
**Paul Niklas**

Mailing Address 3435 Golden Avenue  
Apartment 1402

City State Zip Code  
Cincinnati OH 45226

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

Name of Employer Occupation  
Self-Employed Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2014**

**Transaction ID : A-CF6102**

Amount of Each Receipt this Period  
**300**

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

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

**875.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sheri Osterfeld**

Mailing Address 8523 Saint Ives Place

City State Zip Code  
Cincinnati OH 45255-5641

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

Name of Employer Occupation  
Penn Station, Inc. Secretary

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**575**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		02		2014

**Transaction ID : A-CF6085**

Amount of Each Receipt this Period  
**75**

**B.** Full Name (Last, First, Middle Initial)  
**Barry S. Porter**

Mailing Address 385 Oliver Road

City State Zip Code  
Cincinnati OH 45215

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		02		2014

**Transaction ID : A-CF6100**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Randy Ritz**

Mailing Address 6526 Foxchase Lane

City State Zip Code  
Cincinnati OH 45243-3160

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

Name of Employer Occupation  
Turnbull Construction Construction Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		02		2014

**Transaction ID : A-CF6075**

Amount of Each Receipt this Period  
**200**

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

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

**375.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Roth**

Mailing Address 7334 Eastborne Road

City State Zip Code  
Cincinnati OH 45255-3961

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

Name of Employer Occupation  
Janell Concrete Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2014**

**Transaction ID : A-CF6083**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Carl Shapiro**

Mailing Address 11300 Cornell Park Drive  
Suite 110

City State Zip Code  
Blue Ash OH 45242-1858

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**375**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2014**

**Transaction ID : A-CF6106**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Frank Welsh**

Mailing Address PO Box 42861

City State Zip Code  
Cincinnati OH 45242-0861

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**650**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2014**

**Transaction ID : A-CF6099**

Amount of Each Receipt this Period  
**350**

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

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

**1100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Neil Bortz**

Mailing Address 1055 Saint Paul Place

City Cincinnati State OH Zip Code 45202-6042

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

Name of Employer Towne Properties Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : A-CF6142**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Patricia Bryan**

Mailing Address 8980 Indian Ridge Lane

City Cincinnati State OH Zip Code 45243-3718

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3375**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : A-CF6137**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Rick Bryan**

Mailing Address 8980 Indian Ridge Lane

City Cincinnati State OH Zip Code 45243

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2125**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : A-CF6138**

Amount of Each Receipt this Period  
**500**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence Kurtzman**

Mailing Address 7439 E Aracoma Drive

City State Zip Code  
Cincinnati OH 45237-2325

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

Name of Employer Occupation  
Self-Employed Surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : A-CF6065**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Ken Oaks**

Mailing Address 270 Sunny Acres Drive

City State Zip Code  
Cincinnati OH 45255

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

Name of Employer Occupation  
Total Quality Logistics Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : A-CF6140**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Kevin Sunshein**

Mailing Address 187 Southbrook Drive

City State Zip Code  
Dayton OH 45459-2858

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

Name of Employer Occupation  
Self-Employed Podiatrist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 03 / 2014**

**Transaction ID : A-CF6057**

Amount of Each Receipt this Period  
**250**

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

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

**3350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Mayernik**

Mailing Address 4355 Ferguson Drive  
Suite 280

City Cincinnati State OH Zip Code 45245-5137

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

Name of Employer Sonoma Holdings, LLC Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 08 / 2014**

**Transaction ID : A-CF6139**

Amount of Each Receipt this Period  
**500**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**500.00**

**24650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 50
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Buffalo Wild Wings, Inc. PAC (BWW PAC)**

Mailing Address 5500 Wayzata Boulevard  
Suite 1600

City Minneapolis State MN Zip Code 55416-1237

FEC ID number of contributing federal political committee. **C** C00492157

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 16 / 2014

**Transaction ID : A-CF5938**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**National Association of Home Builders PAC (BUILD PAC)**

Mailing Address 1201 15th Street NW

City Washington State DC Zip Code 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 17 / 2014

**Transaction ID : A-CF5948**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**GCNK Apartment Association OH PAC 739**

Mailing Address 525 W 5th Street  
Suite 105

City Covington State KY Zip Code 41011-1293

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 23 / 2014

**Transaction ID : A-CF6032**

Amount of Each Receipt this Period  
 250  
 Federally Permissible Funds

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

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

2250.00



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

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

FOR LINE NUMBER: PAGE 25 OF 50  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Gkn Aerospace Inc Political Aciton Committee Fka Gkn Aerospace Chem-Tronics PAC

Mailing Address 1150 West Bradley Avenue

City State Zip Code  
El Cajon CA 92020-1504

FEC ID number of contributing federal political committee. **C** C00210559

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 23 / 2014

**Transaction ID : A-CF6031**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
The Association of Credit and Collection Professionals PAC (ACPAC)

Mailing Address 509 2nd Street

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00034785

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 27 / 2014

**Transaction ID : A-CF6024**

Amount of Each Receipt this Period  
2000

**C.** Full Name (Last, First, Middle Initial)  
United Technologies Corporation Political Action Committee

Mailing Address 1101 Pennsylvania Avenue NW  
Floor 10

City State Zip Code  
Washington DC 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 27 / 2014

**Transaction ID : A-CF6025**

Amount of Each Receipt this Period  
2000

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 26 OF 50  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Dealers Election Action Committee of the National Automobile Association**

Mailing Address 412 First Street SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 28 2014**

**Transaction ID : A-CF6026**

Amount of Each Receipt this Period  
**5000**

**B. Full Name (Last, First, Middle Initial)**  
**UnitedHealth Group Incorporated PAC (United for Health)**

Mailing Address 9900 BREN ROAD EAST

City MINNETONKA State MN Zip Code 55343

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 28 2014**

**Transaction ID : A-CF6029**

Amount of Each Receipt this Period  
**1500**

**C. Full Name (Last, First, Middle Initial)**  
**The Freedom Project**

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C C00305805**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 30 2014**

**Transaction ID : A-CF6052**

Amount of Each Receipt this Period  
**5000**

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

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

**11500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 50
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Airlines Political Action Committee**

Mailing Address 1101 17th Street NW  
Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00107300**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : A-CF6056**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Deloitte Political Action Committee**

Mailing Address PO Box 365

City Washington State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : A-CF6055**

Amount of Each Receipt this Period  
2000

**C.** Full Name (Last, First, Middle Initial)  
**National Athletic Trainers' Association Inc Political Action Committee (NATA PAC)**

Mailing Address 2952 North Stemmons Freeway

City Dallas State TX Zip Code 75247-6113

FEC ID number of contributing federal political committee. **C C00408518**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : A-CF6053**

Amount of Each Receipt this Period  
3000

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 50
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
People Pac (paccar Inc Employees Organized For Political Leadership And Education PAC)

Mailing Address PO Box 1518  
777 106th Ave NE

City Bellevue State WA Zip Code 98009-1518

FEC ID number of contributing federal political committee. **C** C00034355

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2014

**Transaction ID : A-CF6054**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
National Pro-Life Alliance PAC

Mailing Address 4521 Windsor Arms Court

City Annandale State VA Zip Code 22003-5751

FEC ID number of contributing federal political committee. **C** C00358051

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2014

**Transaction ID : A-CF6072**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
Sycamore Township Republican Club

Mailing Address 8563 Plainfield Road

City Cincinnati State OH Zip Code 45236-1866

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2014

**Transaction ID : A-CF6089**

Amount of Each Receipt this Period  
250

Federally Permissible Funds

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 50
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Medical Association PAC (AMA PAC)**

Mailing Address 25 Massachusetts Avenue NW  
Suite 600

City Washington State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2014

**Transaction ID : A-CF6146**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Citizens For Tom Weidman**

Mailing Address 8180 Kemperridge Court

City Cincinnati State OH Zip Code 45249

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2014

**Transaction ID : A-CF6143**

Amount of Each Receipt this Period  
250

Federally Permissible Funds

**C.** Full Name (Last, First, Middle Initial)  
**Commerce Bancs PAC**

Mailing Address 922 Walnut Street  
Suite 800

City Kansas City State MO Zip Code 64106-1802

FEC ID number of contributing federal political committee. **C** C00072967

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2014

**Transaction ID : A-CF6141**

Amount of Each Receipt this Period  
1000

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

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 50
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Air Transport Services Group, Inc.**

Mailing Address 145 Hunter Drive

City State Zip Code  
Wilmington OH 45177-9550

FEC ID number of contributing federal political committee. **C** C00238311

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2014

**Transaction ID : A-CF6123**

Amount of Each Receipt this Period  
500

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

29750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 72 <b>Transaction ID : B-E-6001</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 32.4 <b>Transaction ID : B-E-5997</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PNC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address PO Box 856177		Amount of Each Disbursement this Period 1451.83 <b>Transaction ID : B-E-5956</b>
City Louisville	State KY Zip Code 40285	
Purpose of Disbursement SEE MEMO ITEMS	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1556.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. US House of Representatives Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address Longworth House Office Building New Jersey Avenue SE		Amount of Each Disbursement this Period 57
City Washington	State DC Zip Code 20515	
Purpose of Disbursement Gifts & Mementos	Category/Type 006	<b>Transaction ID : B-S-2945</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(10/17/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US House of Representatives Gift Shop</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address Longworth House Office Building New Jersey Avenue SE		Amount of Each Disbursement this Period 31.7
City Washington	State DC Zip Code 20515	
Purpose of Disbursement Gifts & Mementos	Category/Type 006	<b>Transaction ID : B-S-2946</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(10/17/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 3400 Highland Avenue		Amount of Each Disbursement this Period 139.12
City Cincinnati	State OH Zip Code 45213	
Purpose of Disbursement Banners & Signs	Category/Type 006	<b>Transaction ID : B-S-2949</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(10/17/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2014</b>
Mailing Address <b>3400 Highland Avenue</b>		Amount of Each Disbursement this Period <b>270.02</b>
City <b>Cincinnati</b> State <b>OH</b> Zip Code <b>45213</b>	Purpose of Disbursement <b>Banners &amp; Signs</b> <b>006</b> Category/Type	
Candidate Name		<b>Transaction ID : B-S-2956</b> <b>[MEMO ITEM]</b> Subitemization of PNC Bank(10/17/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lowe's</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2014</b>
Mailing Address <b>5385 Ridge Avenue</b>		Amount of Each Disbursement this Period <b>237.11</b>
City <b>Cincinnati</b> State <b>OH</b> Zip Code <b>45213</b>	Purpose of Disbursement <b>Banners &amp; Signs</b> <b>006</b> Category/Type	
Candidate Name		<b>Transaction ID : B-S-2957</b> <b>[MEMO ITEM]</b> Subitemization of PNC Bank(10/17/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Amazon</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2014</b>
Mailing Address <b>410 Terry Avenue North</b>		Amount of Each Disbursement this Period <b>100.98</b>
City <b>Seattle</b> State <b>WA</b> Zip Code <b>98109</b>	Purpose of Disbursement <b>Gifts &amp; Mementos</b> <b>006</b> Category/Type	
Candidate Name		<b>Transaction ID : B-S-2954</b> <b>[MEMO ITEM]</b> Subitemization of PNC Bank(10/17/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 6 <b>Transaction ID : B-E-5999</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.5 <b>Transaction ID : B-E-5998</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 9 <b>Transaction ID : B-E-6000</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. GECC 2005-C1 Skytop**

Full Name (Last, First, Middle Initial)  
Mailing Address 4695 Lake Forest Drive #100

City Cininnati State OH Zip Code 45242

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 22 / 2014

Amount of Each Disbursement this Period: 2250

Transaction ID : B-E-6008

Category/Type: 001

**B. Piryx, Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address 144 2nd Street 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement E-Merchant Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 22 / 2014

Amount of Each Disbursement this Period: 63

Transaction ID : B-E-6124

Category/Type: 001

**c. Maggie Wuellner**

Full Name (Last, First, Middle Initial)  
Mailing Address 3422 Custer Avenue

City Cincinnati State OH Zip Code 45208-2529

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 22 / 2014

Amount of Each Disbursement this Period: 2500

Transaction ID : B-E-6007

Category/Type: 003

**SUBTOTAL** of Disbursements This Page (optional)..... 4813.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Queen City Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 331 E 4th Street		Amount of Each Disbursement this Period 372.24 <b>Transaction ID : B-E-6012</b>
City Cincinnati	State OH Zip Code 45202-4201	
Purpose of Disbursement Catering	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 2.4 <b>Transaction ID : B-E-6125</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 8.1 <b>Transaction ID : B-E-6126</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	382.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Epiphany Productions</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 104 Hume Avenue			Amount of Each Disbursement this Period 3607.33	
City Alexandria	State VA	Zip Code 22301-1015	Transaction ID : B-E-6049	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 003	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Epiphany Productions</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 104 Hume Avenue			Amount of Each Disbursement this Period 3000	
City Alexandria	State VA	Zip Code 22301-1015	Transaction ID : B-S-2964	
Purpose of Disbursement Fundraising Consulting		Category/ Type 003	[MEMO ITEM] Subitemization of Epiphany Productions(10/29/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 3610 Hacks Cross Road			Amount of Each Disbursement this Period 61.33	
City Memphis	State TN	Zip Code 38125	Transaction ID : B-S-2966	
Purpose of Disbursement Express Shipping		Category/ Type 001	[MEMO ITEM] Subitemization of Epiphany Productions(10/29/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3607.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Charlie Palmer Steak</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 101 Constitution Avenue NW		Amount of Each Disbursement this Period 546
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Catering	Category/Type 003	<b>Transaction ID : B-S-2965</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Epiphany Productions(10/29/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 75
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	<b>Transaction ID : B-E-6127</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paycor, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 5145.39
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	<b>Transaction ID : B-E-6120</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5220.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gregory Brooks</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 9551		Amount of Each Disbursement this Period 3892.2
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Payroll	Category/Type 001	<b>Transaction ID : B-S-2967</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Paycor, Inc.(10/30/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kyle Kirker</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO Box 9551		Amount of Each Disbursement this Period 1253.19
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Payroll	Category/Type 001	<b>Transaction ID : B-S-2968</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Paycor, Inc.(10/30/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paycor, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 644 Linn Street Suite 200		Amount of Each Disbursement this Period 2447.11
City Cincinnati	State OH Zip Code 45203-1734	
Purpose of Disbursement Payroll Taxes	Category/Type 001	<b>Transaction ID : B-E-6121</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2447.11
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 50			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paycor, Inc.</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		30		2014
M M	/	D D	/	Y Y Y Y								
10		30		2014								
Mailing Address <b>644 Linn Street Suite 200</b>		Amount of Each Disbursement this Period <table border="1"> <tr> <td>56.58</td> </tr> </table>	56.58									
56.58												
City <b>Cincinnati</b>	State <b>OH</b>	Zip Code <b>45203-1734</b>										
Purpose of Disbursement <b>Payroll Fees</b>		Transaction ID : <b>B-E-6122</b>										
Candidate Name												
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For: 2014	<input type="checkbox"/> Senate	<input type="checkbox"/> President							
<input type="checkbox"/> House	Disbursement For: 2014											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
District:		Category/Type <b>001</b>										

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		30		2014
M M	/	D D	/	Y Y Y Y								
10		30		2014								
Mailing Address <b>144 2nd Street 1st Floor</b>		Amount of Each Disbursement this Period <table border="1"> <tr> <td>12</td> </tr> </table>	12									
12												
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94105</b>										
Purpose of Disbursement <b>E-Merchant Fees</b>		Transaction ID : <b>B-E-6128</b>										
Candidate Name												
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For: 2014	<input type="checkbox"/> Senate	<input type="checkbox"/> President							
<input type="checkbox"/> House	Disbursement For: 2014											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
District:		Category/Type <b>001</b>										

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		31		2014
M M	/	D D	/	Y Y Y Y								
10		31		2014								
Mailing Address <b>144 2nd Street 1st Floor</b>		Amount of Each Disbursement this Period <table border="1"> <tr> <td>6</td> </tr> </table>	6									
6												
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94105</b>										
Purpose of Disbursement <b>E-Merchant Fees</b>		Transaction ID : <b>B-E-6129</b>										
Candidate Name												
Office Sought:	<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>	<input type="checkbox"/> House	Disbursement For: 2014	<input type="checkbox"/> Senate	<input type="checkbox"/> President							
<input type="checkbox"/> House	Disbursement For: 2014											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
District:		Category/Type <b>001</b>										

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>74.58</td> </tr> </table>	74.58
74.58		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 03 / 2014</b>
Mailing Address <b>144 2nd Street 1st Floor</b>		Amount of Each Disbursement this Period <b>6</b>
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94105</b>
Purpose of Disbursement <b>E-Merchant Fees</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : B-E-6130</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 03 / 2014</b>
Mailing Address <b>144 2nd Street 1st Floor</b>		Amount of Each Disbursement this Period <b>29</b>
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94105</b>
Purpose of Disbursement <b>E-Merchant Fees</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : B-E-6159</b>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 04 / 2014</b>
Mailing Address <b>144 2nd Street 1st Floor</b>		Amount of Each Disbursement this Period <b>12</b>
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94105</b>
Purpose of Disbursement <b>E-Merchant Fees</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : B-E-6131</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>47.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mailink</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 701 143rd Avenue NW Suite M		Amount of Each Disbursement this Period 560.38
City Ramsey	State MN Zip Code 55303	
Purpose of Disbursement Postage	Category/Type 003	<b>Transaction ID : B-E-6150</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Epiphany Productions</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 3067.04
City Alexandria	State VA Zip Code 22301-1015	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	<b>Transaction ID : B-E-6154</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PNC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address PO Box 856177		Amount of Each Disbursement this Period 3149.6
City Louisville	State KY Zip Code 40285	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	<b>Transaction ID : B-E-6153</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6777.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lowe's</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5385 Ridge Avenue		Amount of Each Disbursement this Period 189.67
City Cincinnati	State OH Zip Code 45213	
Purpose of Disbursement Banners & Signs	Category/Type 006	<b>Transaction ID : B-S-2978</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(11/24/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Dairy Farmers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 3955 Montgomery Road		Amount of Each Disbursement this Period 34.76
City Cincinnati	State OH Zip Code 45212	
Purpose of Disbursement Meal Expense	Category/Type 001	<b>Transaction ID : B-S-2994</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(11/24/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kroger</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 3760 Paxton Avenue		Amount of Each Disbursement this Period 108.3
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Food & Beverages	Category/Type 003	<b>Transaction ID : B-S-2999</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(11/24/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Capitol Historical Society</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 200 Maryland Avenue NE		Amount of Each Disbursement this Period 455
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Gifts & Mementos	Category/Type 006	
Candidate Name	Transaction ID : B-S-3009	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of PNC Bank(11/24/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Dairy Farmers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 3955 Montgomery Road		Amount of Each Disbursement this Period 33.67
City Cincinnati	State OH	Zip Code 45212
Purpose of Disbursement Meal Expense	Category/Type 001	
Candidate Name	Transaction ID : B-S-2979	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of PNC Bank(11/24/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Lowe's</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5385 Ridge Avenue		Amount of Each Disbursement this Period 105.18
City Cincinnati	State OH	Zip Code 45213
Purpose of Disbursement Banners & Signs	Category/Type 006	
Candidate Name	Transaction ID : B-S-2984	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of PNC Bank(11/24/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Dairy Farmers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 3955 Montgomery Road		Amount of Each Disbursement this Period 42.76
City Cincinnati	State OH Zip Code 45212	
Purpose of Disbursement Meal Expense	Category/Type 001	<b>Transaction ID : B-S-2985</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(11/24/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Dairy Farmers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 3955 Montgomery Road		Amount of Each Disbursement this Period 48.57
City Cincinnati	State OH Zip Code 45212	
Purpose of Disbursement Meal Expense	Category/Type 001	<b>Transaction ID : B-S-2991</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(11/24/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United Dairy Farmers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 3955 Montgomery Road		Amount of Each Disbursement this Period 37.07
City Cincinnati	State OH Zip Code 45212	
Purpose of Disbursement Meal Expense	Category/Type 001	<b>Transaction ID : B-S-2998</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(11/24/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kroger</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 3760 Paxton Avenue		Amount of Each Disbursement this Period 53.24
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Food & Beverages	Category/Type 003	<b>Transaction ID : B-S-3003</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(11/24/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kroger</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 3760 Paxton Avenue		Amount of Each Disbursement this Period 45.43
City Cincinnati	State OH Zip Code 45209	
Purpose of Disbursement Food & Beverages	Category/Type 003	<b>Transaction ID : B-S-3004</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(11/24/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United Dairy Farmers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 3955 Montgomery Road		Amount of Each Disbursement this Period 14.96
City Cincinnati	State OH Zip Code 45212	
Purpose of Disbursement Meal Expense	Category/Type 001	<b>Transaction ID : B-S-3028</b>  <b>[MEMO ITEM]</b> Subitemization of PNC Bank(11/24/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Maggie Wuellner</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 24 / 2014</b>
Mailing Address <b>3422 Custer Avenue</b>		Amount of Each Disbursement this Period <b>2500</b> <b>Transaction ID : B-E-6152</b>
City <b>Cincinnati</b> State <b>OH</b> Zip Code <b>45208-2529</b>	Purpose of Disbursement <b>Fundraising Consulting</b> Category/Type <b>003</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>27441.90</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 50	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Wubbolding</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 27 / 2014</b>
Mailing Address 5490 Windridge Court		Amount of Each Disbursement this Period <b>500</b>
City Cincinnati	State OH Zip Code 45243-2967	
Purpose of Disbursement Contribution Refund	Category/Type <b>010</b>	<b>Transaction ID : B-E-6048</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>500.00</b>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 50			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Citizens for Mike Mezher</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 8075 Beechmont Avenue		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-6014</b>
City Cincinnati State OH Zip Code 45255	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>Michael Mezher</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	(For State/Local Candidate Support)
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Haines for Ohio</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 4237 Glenway Avenue		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-6013</b>
City Cincinnati State OH Zip Code 45236	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>Zachary Haines</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	(For State/Local Candidate Support)
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Friends of Jonathan Dever</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 632 Vine Street Suite 805		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-6021</b>
City Cincinnati State OH Zip Code 45202	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>Jonathan Dever</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	(For State/Local Candidate Support)
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	2000.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Wenstrup for Congress** Transaction ID : **SC/10-L2**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Dr. Brad Wenstrup</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2012
Mailing Address 512 Missouri Avenue		

City	State	ZIP Code
Cincinnati	OH	45226-1121

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
55000	2500	52500

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 02 / D 24 / Y 2012	M M / D D / On Demand	0.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Dr. Brad Wenstrup	Wellington Orthopaedic+Sp/Med
Mailing Address 512 Missouri Avenue	Occupation Podiatrist
City State ZIP Code Cincinnati OH 45226-1121	Amount Guaranteed Outstanding: 52500 <b>Transaction ID : SC/10-L2.G</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	52500.00
<b>TOTALS</b> This Period (last page in this line only).....	52500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.