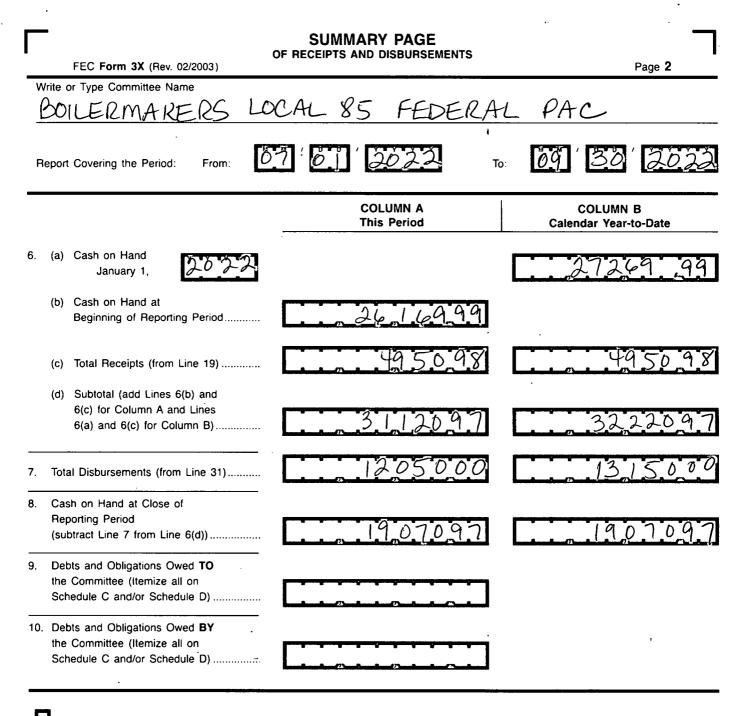
(Choose One) Report Report<	FEC FORM 3X	REPORT OF AND DISBUF For Other Than An Aut	RSEMENTS	2022 OCT 1	IVED LCENTER 3 PM12: 04
ADDRESS (number and street) 3/91 GLAGNUQQQ, RD Check if different than previously CSSECRED. CH Check if different than previously CSSECRED. CH 2. FEC IDENTIFICATION NUMBER V CITY A STATE A ZIP CODE A 3. IS THIS NEW OR AMENDED (a) Cuarterly Reports: B. Constraints (MO) Amended (Ma) Amended (Ma) (a) Cuarterly Reports: April 15 Constraints (Ma) Jul 20 (M3) Jul 20 (M6) Sep 20 (M9) Dec 20 (M1) (b) Outletly Report (C1) July 15 Convertion (12C) Special (12G) Runotf (12R) (c) Outletly Report (C2) Convertion (12C) Special (12S) In the state of interest (12G) Runotf (12R) (b) Outletly Report (C2) July 31 Mid-Year Election on Convention (12C) Special (12S) (c) Outletly Report (C2) July 31 Mid-Year Election on Convention (12C) Special (12G) Runotf (12R) (c) 30-Day POST-Election General (30G) Runotf (30R) Special (30S) (c) Termination Report Termination Report and to the best of my knowledge and belief it is true, correct and complete. Type o		· · · · · · · · · · · · · ·		12FE4M5	
Check if different in previous preported. (ACC) CITY A STATE A ZIP CODE A CITY A STATE A CITY A STA	BOILERMA	HKE,RS, LOCAL	- 85 FEDE	RAL P	ACILLI
Check if different insperiods (ACC) CSSECRE 2. FEC IDENTIFICATION NUMBER CITY A STATE A ZIP CODE A 3. IS THIS REPORT CITY A STATE A ZIP CODE A 4. TYPE OF REPORT (Choose One) 3. IS THIS REPORT NEW (N) OR AMENDED (A) 4. TYPE OF REPORT (Choose One) (b) Monthly Report Feb 20 (M2) (a) Quarterly Report (D1) (b) doutferly Report (D1) (c) Quarterly Report (D2) (c) Quarterly Repo					
than previously reported: (ACG) Image: ACG (ACG) Image: ACG (ACG) Image: ACG (ACG) 2. FEC IDENTIFICATION NUMBER V CITY A STATE A ZIP CODE A 3. IS THIS NEW OR AMENDED 4. TYPE OF REPORT (N) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8) Over 20 (M8) Over 20 (M8) 4. TYPE OF REPORT (b) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8) Over 20 (M9) Over 20 (M1) Over 20 (M1) Over 20 (M9) Over 20 (M	ADDRESS (number and st	reet) BIG GLEF	$\psi \varphi \varphi \varphi \varphi$, RD		
2. FEC IDENTIFICATION NUMBER V CITY A STATE A ZIP CODE A Image: Contract of the state of t	than previously	AACENDA	<u> </u>	Inthe 143	Hall
3. IS THIS IMAGE NEW AMENDED 4. TYPE OF REPORT (K) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M1) 4. TYPE OF REPORT (Choose One) (A) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M1) (a) Quarterly Report (Q1) Jul 15 Quarterly Report (Q2) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) (b) Cother 15 Quarterly Report (Q2) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) (c) Addressing Report (Q2) January 31 Report for the: Convention (12C) Special (12S) Runoff (12R) (a) July 31 Mid/Vear Report for the: Convention (12C) Special (03R) Special (03C) (c) TERN Termination Report (TER) Election on Image (12S) Image (12S) (d) 30-Day Post-filection General (30G) Runoff (30R) Special (30S) Report (TER) Termination Report Image (12S) Image (12S) Image (12S) Post-filection General (30G) Runoff (30R) Special (30S) Report (Nor-feection (TER) Image (12S) Image (12S)					
(Choose One) (a) Quarterly Reports: (b) Report (c) Mar 20 (M3) (Mar 20 (M4) (Mar 20 (M4) (Mar 20 (M4) (Mar 20 (M3) (Mar 20 (Mar 20)		2 2 2 2 3 I			
April 15 Quarterly Report (Q1) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) Primary (12P) General (12G) Runoff (12R) January 31 Year-End Report (Q3) January 31 Year-End Report (Q4) Election on Image: Convention (12C) Special (12S) January 31 Year-End Report (Q4) Election on Image: Convention (12C) Special (12S) July 31 Mid-Year Report Non-election Year Only) (MY) Election on Image: Convention (12C) Special (12S) Image: Termination Report (TER) Termination Report (TER) General (30G) Runoff (30R) Special (30S) Image: Termination Report (TER) Image: Conversion on S. Covering Period Image: Conversion on Image: C	(Choose One)	Report Due On: Ma			9) Dec 20 (M12) (Non-Election
January 31 Year-End Report (YE) In the State of State of State of State of State of Year Only) (MY) Image: Description of the State of Year Only) (MY) Image: Description of the State of Termination Report for the State of Termination Report for the State of Termination Report (TER) Image: Description of the State of Termination Report (TER) Image: Description of the State of Termination Report for the State of State of Termination Report (TER) Image: Description of the State of Termination Report (TER) Image: Description of the State of Termination Report for the State of Termination Report for the State of Termination Report (TER) Image: Description of the State of Termination Report for the State of Termination Report for the State of Termination Report (TER) Image: Description of Termination Report for the State of Terminatin Report for terminatin Report for the State of Termination Repor	April 15 Quarterly R July 15 Quarterly R Quarterly R	eport (Q1) (C) 12-Day PRE-Election Report for the:	Primary (12P)	General (12G)	10) Jan 31 (YE)
Termination Report (TER) Election on Image: Comparison of the state of through 5. Covering Period Image: Comparison of the state of through Image: Comparison of the state of through 1 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 Image: Comparison of the state of the sta	January 31 Year-End R July 31 Mid Report (Nor	eport (YE) Electi I-Year (d) 30-Day In-election (MY) POST-Election		Runoff (30R)	
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 TIMOTHY TIMMONS Signature of Treasurer Date Date Date		Report	ion on		
Type or Print Name of Treasurer TIMOTITY TIMMONS Signature of Treasurer	5. Covering Period	69 61 202	2. through C	913012	022
		Tulottel !		s true, correct and com	piete.
NOTE: Submission of false, arronaous, or incomplete information may subject the parson signing this Report to the penalties of 2.11.5.C. \$437a	Signature of Treasurer	Ladi		Date	07 2022
Office Use Set 12/2004	Office	e, erroneous, or incomplete information	on may subject the person signi		,

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This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

FE6AN026

DETAILED SUMMARY PAGE					
FEC Form 3X (Rev. 06/2004) Page 3					
		A ME FEAGOA	0		
12	BOILERMAKERS LOCI	42 85 FEDERAL	PAC		
Re	eport Covering the Period: From:	7 01 2022 To	5 09 ' <u>30 '202</u> 2		
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)				
	(ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)▶	495098	4950.98		
	 (b) Political Party Committees (c) Other Political Committees (such as PACs)				
12.	11(a)(iiii), (b), and (c)) (Carry Totals to Line 33, page 5)	495098	4950.98		
13.	Party Committees All Loans Received				
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)				
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees				
17.	Other Federal Receipts				
18.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)				
	(b) Levin Funds (from Schedule H5)				
	(c) Total Transfers (add 18(a) and 18(b))				
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	4,950,98	495098		
20 . ⁻	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	4950 98	495098		

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2022 - 10 - 11 - 01 - 00410804

FE6AN026

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of Disbursements

FEC Form 3X (Rev. 02/2003) II. Disbursements

21. Operating Expenditures:

(i)

Committees...

Contributions to

23.

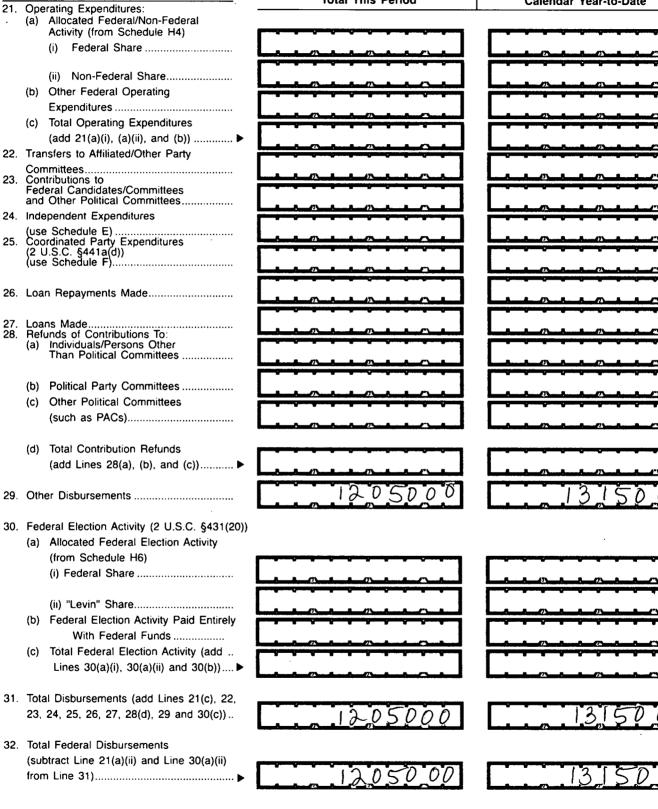
25.

27. 28.

COLUMN A **Total This Period**

COLUMN B Calendar Year-to-Date

Page 4





FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 5
	. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	495098	4950
34.	Total Contribution Refunds (from Line 28(d))	0.00	D.
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	495008	4950
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	000	D.
37.	Offsets to Operating Expenditures (from Line 15, page 3)	000	0
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	000	0

495098
0,00
495098
 000
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FE6AN026

SCHEDULE B (FEC Form 3X)			NUMBER PAGE OF		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	one)		
	Detailed Summary Page	21b	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
/ BOILERMAKERS LOC	AL85 FEDI	ERAL	-PAC		
Full Name (Last, First, Middle Initial)	0.1		Date of Disbursement		
A. CHERRY FOR COUN			D9 (D1 (DD 2 2)		
2776 HEMLOCK DR.	TOL.OH 436 State Zip Code	14			
FUNDRAISER					
Purpose of Disbursement MATT CHERRY	Г		Amount of Each Disbursement this Period		
TOLEDO CITY COUN	CIL	Category/ Type	55000		
Office Sought: House Disburser	nent For:				
President	Primary General Other (specify) ▼				
State: District: Full Name (Last, First, Middle Initial)					
B. TIM BARHORST FOR	OHID				
Mayling Address 4679 WINTERSET DR. (13220	09 15 2022		
E'AMPAIGN CONT	State Zip Code	0000			
Purpose of Disbursement TIM BAR HORST	1		Amount of Each Disbursement this Period		
Candidate Name STATE REP. 04 DIST 8	5	Category/	100000		
Office Sought: House Disbursement For:					
Senate Primary General President Other (specify) ▼					
State: District:					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
Mailing Address		0911512023			
24 PHULH CT. FREMONT, OH 43420					
CAMPAIGN CONT. State Zip Code					
GARY CLICK		Amount of Each Disbursement this Period			
STATE REP, 0H DIS	T 88	Category/ Type	100000		
	ment For: Primary General		n		
President	Other (specify)				
State: District.					
SUBTOTAL of Disbursements This Page (optional)		••••••••••••••••••••••••••••••••••••••	255000		
TOTAL This Period (last page this line number only))	····· •			

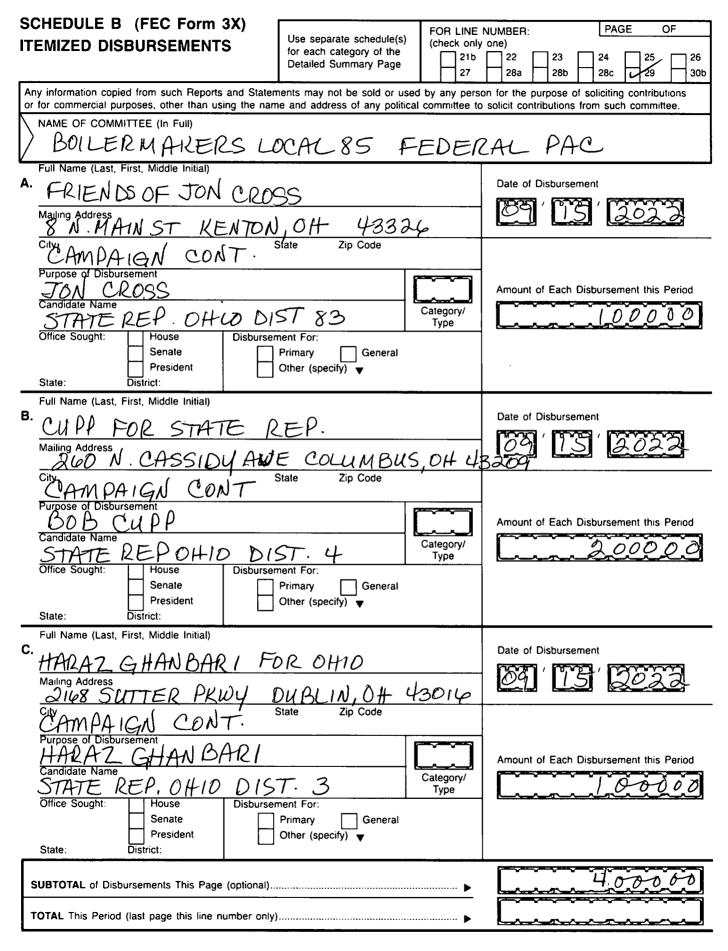
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FEC Schedule B (Form 3X) Rev. 02/2003

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27	
Any information copied from such Reports and State			
or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	me and address of any politica	al committee to	solicit contributions from such committee.
BOILERMAKERS 1	LOCAL 85 H	EDE	RAL PAC
Full Name (Last, First, Middle Initial)	/		
A. FRIENDS OF DEREK	MERRIN		Date of Disbursement
8129 BRIDGE HAMPTON DR	WATERVILLE	0#43	1 1 2 202d
CILAM PAIGN CONT	State Zip Code		/
Purpose of Disbursement DEREK MERRIN			Amount of Each Disbursement this Period
Candidate Name OH STATEREP. DIST	. 47	Category/ Type	10000
	ement For: Primary General	78-	
President	Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
B. STEIN FOR STATE	RFD.		Date of Disbursement
Mailing Address 2854 ST. RT. GI NORWI		7	091512022
CAMPAIGN CONT.	State Zip Code	/	
Purpose of Disbursement			
DICK STEIN Candidate Name			Amount of Each Disbursement this Peri
OH STATE REP. DIS		Category/ Type	1000
Office Sought: House Disburse	ement For: Primary		
President State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)	I		· · · · ·
C. FRIENDS OF SWE	ARINGEN		Date of Disbursement
C. FRIENDS OF SWE Mailing Address 4679 WINTERSET DR.	COLUMBUS	0#432	
City	State Zip Code		
Purpose of Disbursement			
Candidate Name		Category/	Amount of Each Disbursement this Peri
Office Sought: House Disburse	ement For:	Туре	
Senate President	Primary General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		••••••	3,000,0

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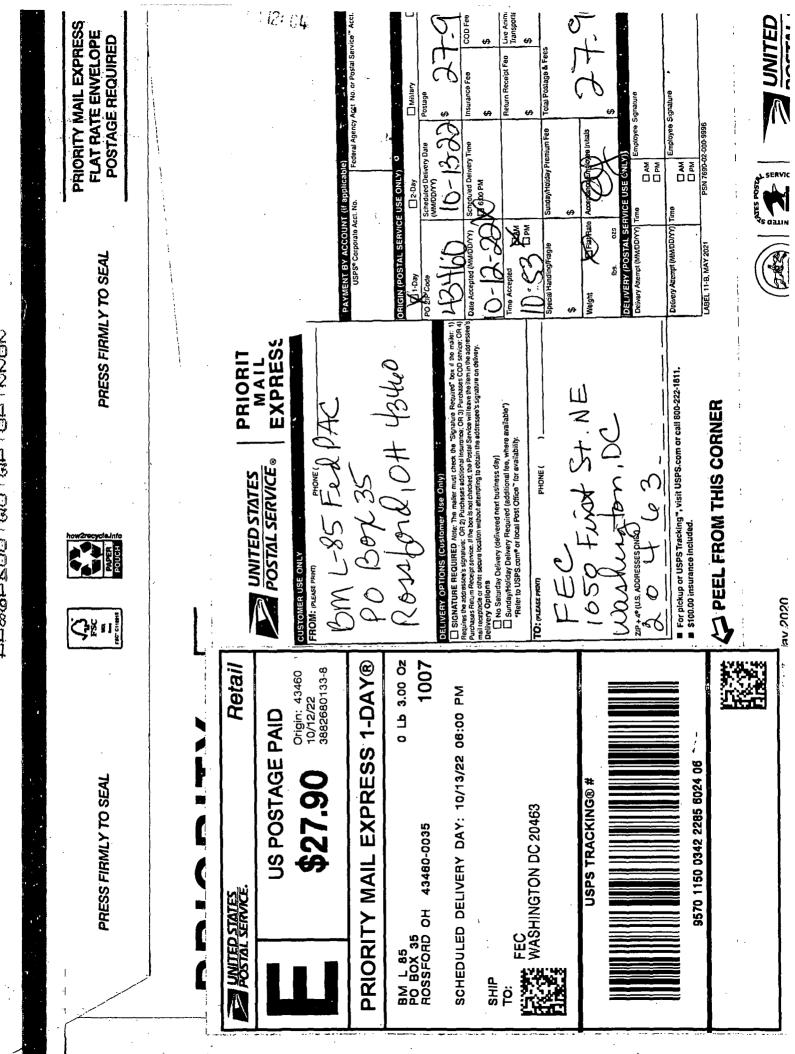
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE M (check only 21b 27		PAGE OF 24 25 26 28c 229 30b
Any information copied from such Reports and Staterr or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) BOILER MAKERS LU	committee to	solicit contributions fro		
A. FRIENDS OF LISA Mailing Address 2714 117 TH ST. TOLEI	FRIENDS OF LISA SOBECKI			nt 1 2023
FUND RAISER Purpose of Disbursement LISA SOBECKI Candidate Name <u>UICAS COUNTY COMM</u> Office Sought: Disbursen Senate		Category/ Type	Amount of Each Dis	bursement this Period
Full Name (Last, First, Middle Initial) B. Mailing Address			Date of Disburseme	nt / / / / / / / / / / / / / / / / / / /
Purpose of Disbursement Candidate Name Office Sought: House Disbursen Senate	State Zip Code	Category/ Type	Amount of Each Dis	bursement this Period
Full Name (Last, First, Middle Initial) C. Mailing Address			Date of Disburseme	ent
City S Purpose of Disbursement Candidate Name Office Sought: House Disbursen Senate President State: District:	State Zip Code	Category/ Type	Amount of Each Dis	sbursement this Period
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				<u>25.0000</u> 2-05000

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS				
The FEC added this page to the end of this filing t	to indicate how it was received.			
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USPS Priority Mail Express	Postmarked 10/12/22			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
. Ne	ext Business Day Delivery			
Received from House Records & Registration C	Date of Receipt Office			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
PREPARER MP	10/13/22 DATE PREPARED			
(3/2015)				

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