FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 5
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type over the lines.	12FE4M5
	okins LLC PAC	
	600 Superior Avenue Suite 2100	
ADDRESS (number and stre		
is changed)	, Cleveland	OH , 44114 , .
		STATE A ZIP CODE A
Committee's E-mail ad	DRESS	
(Check if addres	s pac@mcdonaldhopkins.com	
	Optional Second E-Mail Address	
(Check if address is changed)		
2. DATE 08	10 / Y Y Y Y 2017	
3. FEC IDENTIFICATIO	N NUMBER ► C C00394460	
4. IS THIS STATEMENT	NEW (N) OR AMENDED (A)	
I certify that I have examir	ed this Statement and to the best of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Trea	asurer Kall, David, M, ,	
Signature of Treasurer	Kall, David, M, , [Electronically Filed]	Date 08 / D D / Y Y Y Y 08 10 2017
NOTE: Submission of false,	erroneous, or incomplete information may subject the person signing t ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office Use Only	For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	contact: FEC FORM 1

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FEC	C Form 1 (Revised 02/2009)	Page 2
	DF COMMITTEE	
Candie	date Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	ow.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (C information below.)	Complete the candidate
Name o Candida		
Candida Party Af		
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee	District
Name o	f	
Candida	te	
Party	Committee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Politic	al Action Committee (PAC):	
(e)	X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	connected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	e segregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidates and the set of	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	or two or more political
(Committees Participating in Joint Fundraiser	
	1.	
	2 FEC ID number C	
3	3 FEC ID number C	
2	4 FEC ID number C	

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Write or Type Committee Name

McDonald Hopkins LLC PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

McDonald Hopkins LL	_C		
Mailing Address	600 Superior Avenue Suite 2100		
		ОН 4411	4
Relationship: X Connecte	CITY	STATE Joint Fundraising Representative	ZIP CODE
Custodian of Records: Ide books and records.	entify by name, address (phone number op	tional) and position of the person in	possession of committe
Full Name			
Mailing Address			
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	-
Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the assistant treasurer).	treasurer of the committee; and the	e name and address of
Full Name Kall, Davi	id, M, ,		
Mailing Address	600 Superior Avenue		
	Cleveland	OH4411	
Title or Position Treasurer		STATE Telephone number	ZIP CODE

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Full Name of Designated Agent														I							I									
Mailing Address																														
]																										
								CI	ΓY									ST/	ΑΤΕ					ZI	ΡC		DE			
Title or Position																														
													Tele	eph	ione	e n	umt	ber												

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	The Huntington National Bank	
Mailing Address	7 Easton Oval	
	Columbus	OH 43219 - - - - - - - - - -
	CITY	STATE ZIP CODE
Name of Bank, De	epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

This Statement of Organization is being amended to update the PAC's Lobbyist/Registrant status.

Form/Schedule: Transaction ID: