

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Northwest Ohio Conservative Coalition

ADDRESS (number and street)

4035 Forest Lawn

☐Check if different
than previously
reported. (ACC)

Toledo

OH

43623

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00480145

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☒October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2010

through

09

30

2010

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

R. Jeffrey Lydy

Signature of Treasurer

Electronically Filed by R. Jeffrey Lydy

Date

10

08

2010

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**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 16

Write or Type Committee Name
Northwest Ohio Conservative Coalition

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div>2010YY Y</div>		<div>0.00</div>
(b) Cash on Hand at Beginning of Reporting Period	<div>1510.24</div>	
(c) Total Receipts (from Line 19)	<div>11217.70</div>	<div>16315.61</div>
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<div>12727.94</div>	<div>16315.61</div>
7. Total Disbursements (from Line 31)	<div>4902.38</div>	<div>8490.05</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div>7825.56</div>	<div>7825.56</div>
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<div>0.00</div>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE **OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

3 / 16

Write or Type Committee Name

Northwest Ohio Conservative Coalition

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	6825.00	8325.00
(ii) Unitemized	4392.70	7990.61
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	11217.70	16315.61
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➤	11217.70	16315.61
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	11217.70	16315.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11217.70	16315.61

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	98.25	1435.92	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	98.25	1435.92	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	4804.13	7054.13	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4902.38	8490.05	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4902.38	8490.05	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 16

III. 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)	11217.70	16315.61
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11217.70	16315.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	98.25	1435.92
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	98.25	1435.92

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

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

FOR LINE NUMBER: PAGE 6 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Northwest Ohio Conservative Coalition

A.

Full Name (Last, First, Middle Initial)

James and Lynn Aston

Mailing Address 3509 Eber Rd.

City

Monclova

State

OH

Zip Code

43542

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.4412

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Emily Bennett

Mailing Address 7302 Oak Hill Dr.

City

Sylvania

State

OH

Zip Code

43560

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.4432

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Robert Bennett

Mailing Address 7302 Oak Hill Dr.

City

Sylvania

State

OH

Zip Code

43560

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.4434

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Northwest Ohio Conservative Coalition

A.

Full Name (Last, First, Middle Initial)

Linda Bowyer

Mailing Address 149 Partridge

City

Perrysburg

State

OH

Zip Code

43551

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Toledo

Occupation
Prof.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.4387

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Linda Bowyer

Mailing Address 149 Partridge

City

Perrysburg

State

OH

Zip Code

43551

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Toledo

Occupation
Prof.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.4426

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Dale Bruhl, Jr.

Mailing Address 2359 Willow Pond

City

Sylvania

State

OH

Zip Code

43560

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation
information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.4352

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Northwest Ohio Conservative Coalition

A.

Full Name (Last, First, Middle Initial)

Mark Bruss

Mailing Address 450 N. River Rd.

City

Waterville

State

OH

Zip Code

43566

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.4362

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Mark Bruss

Mailing Address 450 N. River Rd.

City

Waterville

State

OH

Zip Code

43566

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.4416

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Priscilla D'Annibale

Mailing Address 704 Oak Park

City

Toledo

State

OH

Zip Code

43617

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requestedOccupation
information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.4369

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Northwest Ohio Conservative Coalition

A.

Full Name (Last, First, Middle Initial)

David T. DePrisco

Mailing Address 7933 Slate Court

City

Maumee

State

OH

Zip Code

43551

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.4413

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)

Carol Haas

Mailing Address 4771 Ryan Rd.

City

Toledo

State

OH

Zip Code

43614

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation

retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.4405

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Jonathan Hires

Mailing Address 11000 Pineview

City

Temperance

State

MI

Zip Code

48182

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation

information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.4428

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Northwest Ohio Conservative Coalition

A.

Full Name (Last, First, Middle Initial)

Kathy Housepian

Mailing Address 962 Walnut St.

City

Perrysburg

State

OH

Zip Code

43551

FEC ID number of contributing
federal political committee.

C

Name of Employer
Perrysburg Schools

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1625.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.4350

Amount of Each Receipt this Period

1625.00

B.

Full Name (Last, First, Middle Initial)

Timothy M. Lawrence

Mailing Address 7211 Forest Brook Dr.

City

Sylvania

State

OH

Zip Code

43560

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.4406

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

R. Jeffrey Lydy

Mailing Address 4035 Forest Lawn

City

Toledo

State

OH

Zip Code

43623

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Semi Retired Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.4401

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 11 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Northwest Ohio Conservative Coalition

A.

Full Name (Last, First, Middle Initial)

Dr. Ronald Nassar

Mailing Address 8629 Ponte Vedra Ct.

City

Holland

State

OH

Zip Code

43528

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.4331

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Jo Phillips

Mailing Address 2948 Broadway

City

Toledo

State

OH

Zip Code

43614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information requested

Occupation
Information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.4390

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Lynn C. Phillips

Mailing Address 3423 Darlington Rd.

City

Toledo

State

OH

Zip Code

43606

FEC ID number of contributing
federal political committee.

C

Name of Employer
information requested

Occupation
information requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.4410

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Northwest Ohio Conservative Coalition

A.

Full Name (Last, First, Middle Initial)

Mr. Wellington F. Roemer, III

Mailing Address 5339 Brooklawn Dr.

City

Toledo

State

OH

Zip Code

43623

FEC ID number of contributing
federal political committee.

C

Name of Employer
Roemer Insurance

Occupation

Insurance salesman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.4289

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Barbara Scouten

Mailing Address 3316 Westchester

City

Toledo

State

OH

Zip Code

43615

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.4409

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Timothy Toland

Mailing Address 3526 Nordic Way

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Savage & Associates

Occupation

Financial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.4404

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Northwest Ohio Conservative Coalition

A.

Full Name (Last, First, Middle Initial)

Bruce Wetzel

Mailing Address 7550 Coder Rd.

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.4365

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Bruce Wetzel

Mailing Address 7550 Coder Rd.

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.4393

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Bill Zouhary

Mailing Address 442 Berkshire

City

Perrysburg

State

OH

Zip Code

43551

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.4427

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

6825.00

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 14 / 16

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Northwest Ohio Conservative Coalition		FEC IDENTIFICATION NUMBER ▼ C C00480145	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Lamar Companies		Date MM / DD / YYYY 07 / 13 / 2010	
Mailing Address P.O. Box 96030		Amount 1750.00	
City State Zip Code Baton Rouge LA 70896		Transaction ID: SE.4286	
Purpose of Expenditure Billboard		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: KAPTUR FOR CONGRESS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
4000.00			
Full Name (Last, First, Middle, Initial) of Payee Lamar Companies		Date MM / DD / YYYY 07 / 27 / 2010	
Mailing Address P.O. Box 96030		Amount 500.00	
City State Zip Code Baton Rouge LA 70896		Transaction ID: SE.4291	
Purpose of Expenditure Billboard		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: KAPTUR FOR CONGRESS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
4500.00			
(a) SUBTOTAL of Itemized Independent Expenditures		2250.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
R. Jeffrey Lydy Signature		Date MM / DD / YYYY 10 / 08 / 2010	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 15 / 16

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Northwest Ohio Conservative Coalition		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00480145</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Lamar Companies		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 0 8</div> <div style="border: 1px solid black; padding: 2px;">D D 0 3</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address P.O. Box 96030		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>	
City State Zip Code Baton Rouge LA 70896		Transaction ID: SE.4292	
Purpose of Expenditure Billboard		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: KAPTUR FOR CONGRESS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>	
Full Name (Last, First, Middle, Initial) of Payee Lamar Companies		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 0 8</div> <div style="border: 1px solid black; padding: 2px;">D D 1 7</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address P.O. Box 96030		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div>	
City State Zip Code Baton Rouge LA 70896		Transaction ID: SE.4293	
Purpose of Expenditure billboard		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: KAPTUR FOR CONGRESS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">6000.00</div>	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">1500.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>			
R. Jeffrey Lydy Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 0 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Northwest Ohio Conservative Coalition		FEC IDENTIFICATION NUMBER ▼ C C00480145	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Lamar Companies		Date MM / DD / YYYY 09 / 28 / 2010	
Mailing Address P.O. Box 96030		Amount 985.00	
City Baton Rouge		Transaction ID: SE.4294	
State LA		Office Sought: <input checked="" type="checkbox"/> House State: OH	
Zip Code 70896		<input type="checkbox"/> Senate District: 09	
Purpose of Expenditure billboard		<input type="checkbox"/> Presidential	
Category/ Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: KAPTUR FOR CONGRESS		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought 6985.00		<input type="checkbox"/> Other (specify) : _____ 2010	
Full Name (Last, First, Middle, Initial) of Payee Pay Pal Corporate		Date MM / DD / YYYY 09 / 30 / 2010	
Mailing Address 2211 North First St.		Amount 69.13	
City San Jose		Transaction ID: SE.4436	
State CA		Office Sought: <input checked="" type="checkbox"/> House State: OH	
Zip Code 95036		<input type="checkbox"/> Senate District: 09	
Purpose of Expenditure Credit Card charge		<input type="checkbox"/> Presidential	
Category/ Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure:		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought 7054.13		<input type="checkbox"/> Other (specify) : _____ 2010	
(a) SUBTOTAL of Itemized Independent Expenditures		1054.13	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures		4804.13	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
R. Jeffrey Lydy Signature		Date MM / DD / YYYY 10 / 08 / 2010	