

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

Checksmart Financial LLC Political Action Committee

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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 Bridgette Caryn Roman

Signature of Treasurer Bridgette Caryn Roman [Electronically Filed] Date / /

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 | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | | 186647.35 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 177562.75 | |
| (c) Total Receipts (from Line 19) | 27616.04 | 80819.76 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 205178.79 | 267467.11 |
| 7. Total Disbursements (from Line 31)..... | 37061.58 | 99349.90 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 168117.21 | 168117.21 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

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

| 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)..... | 26323.04 | 74796.76 |
| (ii) Unitemized | 1293.00 | 5023.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 27616.04 | 79819.76 |
| (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) | 27616.04 | 79819.76 |
| 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 | 1000.00 |
| 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 Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 27616.04 | 80819.76 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 27616.04 | 80819.76 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated 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 | 61.58 | 299.90 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 61.58 | 299.90 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 7500.00 | 30250.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (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 | 29500.00 | 68800.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated 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)) .. | 37061.58 | 99349.90 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 37061.58 | 99349.90 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 27616.04 | 79819.76 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 27616.04 | 79819.76 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 61.58 | 299.90 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 61.58 | 299.90 |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 24 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 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)
Checksmart Financial LLC Political Action Committee

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Lisa Barber | | Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.6305 |
| Mailing Address 1345 S. Kolb Road Apt 317 | | Amount of Each Receipt this Period 120.00 Bi-weekly payroll deduction of \$20 per pay |
| City Tuscon | State AZ | Zip Code 85710 |
| FEC ID number of contributing federal political committee. C | Name of Employer Checksmart Financial LLC | Occupation Auditor |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 340.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Josh T, Beatty | | Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.6296 |
| Mailing Address 7317 W. Montgomery Rd | | Amount of Each Receipt this Period 300.00 Bi-weekly payroll deduction of \$50 per pay |
| City Peoria | State AZ | Zip Code 85383 |
| FEC ID number of contributing federal political committee. C | Name of Employer Checksmart Financial LLC | Occupation Regional Manager |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 850.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Timothy Bushman | | Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.6306 |
| Mailing Address 2014 NE 2nd Street | | Amount of Each Receipt this Period 120.00 Bi-weekly payroll deduction of \$20 per pay |
| City Blue Springs | State MO | Zip Code 64014 |
| FEC ID number of contributing federal political committee. C | Name of Employer Checksmart Financial LLC | Occupation District Manager |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 340.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 540.00 |
| 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 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. William Chapman
 Full Name (Last, First, Middle Initial)
 Mailing Address 848 Gummer Court
 City Reynoldsburg State OH Zip Code 43068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Checksmart Financial LLC Occupation Director of Loss Prevention
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3400.00

Date of Receipt 09 / 30 / 2014
Transaction ID : SA11AI.6278
 Amount of Each Receipt this Period 1200.00
 Bi-weekly payroll deduction of \$200 per pay

B. Jason Creel
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 Valley Street
 City Hoover State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Checksmart Financial LLC Occupation District Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3541.61

Date of Receipt 09 / 30 / 2014
Transaction ID : SA11AI.6273
 Amount of Each Receipt this Period 1249.98
 Bi-weekly payroll deduction of \$208.33 per pay

C. Eunice Cruz
 Full Name (Last, First, Middle Initial)
 Mailing Address 8030 W. Black Eagle Ct.
 City Tucson State AZ Zip Code 85757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Checksmart Financial LLC Occupation District Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 09 / 30 / 2014
Transaction ID : SA11AI.6300
 Amount of Each Receipt this Period 180.00
 Bi-weekly payroll deduction of \$30 per pay

SUBTOTAL of Receipts This Page (optional).....▶ 2629.98
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: (check only one) | PAGE 8 OF 24 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Greyson Eves | | Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.6292 |
| Mailing Address 959 Turcotte Drive | | Amount of Each Receipt this Period 500.00 |
| City Gahanna | State OH | Zip Code 43203 |
| FEC ID number of contributing federal political committee. C | Name of Employer Checksmart Financial LLC | Occupation Vice President/Controller |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1600.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Jennifer Fisher | | Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.6287 |
| Mailing Address 6000 Falling Rain Ct. | | Amount of Each Receipt this Period 990.00 |
| City Elk Grove | State CA | Zip Code 95757 |
| FEC ID number of contributing federal political committee. C | Name of Employer Checksmart Financial LLC | Occupation Regional Manager |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2805.00 | |
| | | Bi-weekly payroll deduction of \$165 per pay |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Amanda Fox | | Date of Receipt MM / DD / YYYY 09 / 30 / 2014 Transaction ID : SA11AI.6293 |
| Mailing Address 5522 Westerville Crossing Drive | | Amount of Each Receipt this Period 600.00 |
| City Westerville | State OH | Zip Code 43081 |
| FEC ID number of contributing federal political committee. C | Name of Employer Checksmart Financial LLC | Occupation Director of Training |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1700.00 | |
| | | Bi-weekly payroll deduction of \$100 per pay |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2090.00 |
| 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: (check only one) | PAGE 9 OF 24 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Rebecca Ryanne Fox
 Full Name (Last, First, Middle Initial)
 Mailing Address 485 87th Street #8
 City State Zip Code
 Daly City CA 94015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Checksmart Financial LLC Regional Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2550.00

Date of Receipt
 09 / 30 / 2014
Transaction ID : SA11AI.6288
 Amount of Each Receipt this Period
 900.00
 Bi-weekly payroll deduction of \$150 per pay

B. Steven Fryer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4690 Tuttle's Brook Drive
 City State Zip Code
 Dublin OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Checksmart Financial LLC Director of Store Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3541.61

Date of Receipt
 09 / 30 / 2014
Transaction ID : SA11AI.6274
 Amount of Each Receipt this Period
 1249.98
 Bi-weekly payroll deduction of \$208.33 per pay

C. Robert Grenko
 Full Name (Last, First, Middle Initial)
 Mailing Address 3402 East Laurel Lane
 City State Zip Code
 Phoenix AZ 85028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Checksmart Financial LLC Regional Vice President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3400.00

Date of Receipt
 09 / 30 / 2014
Transaction ID : SA11AI.6279
 Amount of Each Receipt this Period
 1200.00
 Bi-weekly payroll deduction of \$200 per pay

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3349.98 |
| 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: (check only one) | PAGE 10 OF 24 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Robert Grieser
Full Name (Last, First, Middle Initial)

Mailing Address 6315 Moore Road

| | | |
|------------------|-------------|-------------------|
| City Delaware | State OH | Zip Code 43015 |
|------------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer Checksmart Financial LLC | Occupation Vice President - Government Affairs |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3553.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 30 | / | 2014 |

Transaction ID : SA11AI.6272

Amount of Each Receipt this Period
1254.00

Bi-weekly payroll deduction of \$209 per pay

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

Mailing Address 4331 Vista Walk Lane

| | | |
|----------------|-------------|-------------------|
| City Powell | State OH | Zip Code 43065 |
|----------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer Checksmart Financial LLC | Occupation Director of Store Development |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 30 | / | 2014 |

Transaction ID : SA11AI.6280

Amount of Each Receipt this Period
1200.00

Bi-weekly payroll deduction of \$200 per pay

C. Pagle Helterbrand
Full Name (Last, First, Middle Initial)

Mailing Address 16469 Middleburg Plain City Road

| | | |
|--------------------|-------------|-------------------|
| City Marysville | State OH | Zip Code 43040 |
|--------------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer Checksmart Financial LLC | Occupation Vice President of Human Resources |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2430.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 30 | / | 2014 |

Transaction ID : SA11AI.6317

Amount of Each Receipt this Period
60.00

Bi-weekly payroll deduction of \$10 per pay

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2514.00 |
| 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: (check only one) | PAGE 11 OF 24 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Suzanne Hinson
Full Name (Last, First, Middle Initial)
Mailing Address 15807 Willowdale Road
City Tampa State FL Zip Code 33625
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation District Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 30 / 2014
Transaction ID : SA11AI.6307
Amount of Each Receipt this Period 90.00
Bi-weekly payroll deduction of \$15 per pay

B. Stacy Howler
Full Name (Last, First, Middle Initial)
Mailing Address 383 Coldwell Court
City Gahanna State OH Zip Code 43230
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Regional Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 09 / 30 / 2014
Transaction ID : SA11AI.6294
Amount of Each Receipt this Period 600.00
Bi-weekly payroll deduction of \$100 per pay

C. Jon Ipp
Full Name (Last, First, Middle Initial)
Mailing Address 4950 S County Rd 300 E
City Liberty State IN Zip Code 47353
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Regional Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3400.00

Date of Receipt 09 / 30 / 2014
Transaction ID : SA11AI.6281
Amount of Each Receipt this Period 1200.00
Bi-weekly payroll deduction of \$200 per pay

SUBTOTAL of Receipts This Page (optional)..... ▶ 1890.00
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: (check only one) | PAGE 12 OF 24 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Kevin I. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7852 Larchwood Street
 City State Zip Code
 Dublin OH 43016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Checksmart Financial LLC District Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 09 / 30 / 2014
Transaction ID : SA11AI.6301
 Amount of Each Receipt this Period
 150.00
 Bi-weekly payroll deduction of \$25 per pay

B. Chris Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 14932 Mercury Lane
 City State Zip Code
 Huntertown IN 46748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Checksmart Financial LLC District Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 09 / 30 / 2014
Transaction ID : SA11AI.6302
 Amount of Each Receipt this Period
 150.00
 Bi-weekly payroll deduction of \$25 per pay

C. Eric Kirk
 Full Name (Last, First, Middle Initial)
 Mailing Address 1440 SouthWabash Avenue, #407
 City State Zip Code
 Chicago IL 60605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Checksmart Financial LLC Regional Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3400.00

Date of Receipt
 09 / 30 / 2014
Transaction ID : SA11AI.6282
 Amount of Each Receipt this Period
 1200.00
 Bi-weekly payroll deduction of \$200 per pay

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1500.00 |
| 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: (check only one) | PAGE 13 OF 24 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Richard D Lake
Full Name (Last, First, Middle Initial)
Mailing Address 4681 Fernway Drive
City North Port State FL Zip Code 34288
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Vice President of Store Development
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1700.00**

Date of Receipt **09 / 30 / 2014**
Transaction ID : SA11AI.6295
Amount of Each Receipt this Period **600.00**
Bi-weekly payroll deduction of \$100 per pay

B. Catherine Meyers
Full Name (Last, First, Middle Initial)
Mailing Address 2187 Ransom Oaks Drive
City Columbus State OH Zip Code 43228
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Controller/Director
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **765.00**

Date of Receipt **09 / 30 / 2014**
Transaction ID : SA11AI.6299
Amount of Each Receipt this Period **270.00**
Bi-weekly payroll deduction of \$45 per pay

C. Sally Mulkey
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 161
City Orient State OH Zip Code 43146
FEC ID number of contributing federal political committee. **C**
Name of Employer Checksmart Financial LLC Occupation Director of Internal Collections Op's
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **425.00**

Date of Receipt **09 / 30 / 2014**
Transaction ID : SA11AI.6303
Amount of Each Receipt this Period **150.00**
Bi-weekly payroll deduction of \$25 per pay

SUBTOTAL of Receipts This Page (optional)..... **1020.00**
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: (check only one) | PAGE 14 OF 24 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Lou Nash
 Full Name (Last, First, Middle Initial)
 Mailing Address 7065 Stillwater Cove
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Checksmart Financial LLC Occupation Chief Recovery Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1754.32**

Date of Receipt **09 / 30 / 2014**
Transaction ID : SA11AI.6291
 Amount of Each Receipt this Period **639.12**
 Bi-weekly payroll deduction of \$106.52 per pay

B. Brian Nordmoe
 Full Name (Last, First, Middle Initial)
 Mailing Address 1647 Minturn Drive
 City New Albany State OH Zip Code 43054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Checksmart Financial LLC Occupation Accounting Department Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **204.00**

Date of Receipt **09 / 30 / 2014**
Transaction ID : SA11AI.6308
 Amount of Each Receipt this Period **72.00**
 Bi-weekly payroll deduction of \$15 per pay

C. Lauren Probst
 Full Name (Last, First, Middle Initial)
 Mailing Address 9550 Shawnee Trail
 City Powell State OH Zip Code 43065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Checksmart Financial LLC Occupation Director of Consumer Compliance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **850.00**

Date of Receipt **09 / 30 / 2014**
Transaction ID : SA11AI.6297
 Amount of Each Receipt this Period **300.00**
 Bi-weekly payroll deduction of \$50 per pay

SUBTOTAL of Receipts This Page (optional)..... **1011.12**
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: (check only one) | PAGE 15 OF 24 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Larry Reisinger | | Date of Receipt 09 / 30 / 2014 Transaction ID : SA11AI.6283 |
| Mailing Address 731 Steeplechase St. | | Amount of Each Receipt this Period 1200.00 Bi-weekly payroll deduction of \$200 per pay |
| City Delaware | State OH | Zip Code 43015 |
| FEC ID number of contributing federal political committee. C | Name of Employer Checksmart Financial LLC | |
| Occupation Regional Vice President | | Aggregate Year-to-Date 3400.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Bridgette Caryn Roman | | Date of Receipt 09 / 30 / 2014 Transaction ID : SA11AI.6277 |
| Mailing Address 8825 Dunsinane Drive | | Amount of Each Receipt this Period 1248.00 Bi-weekly payroll deduction of \$208 per pay |
| City Dublin | State OH | Zip Code 43017 |
| FEC ID number of contributing federal political committee. C | Name of Employer Checksmart Financial LLC | |
| Occupation General Counsel/Vice President | | Aggregate Year-to-Date 3536.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. John Rowe | | Date of Receipt 09 / 30 / 2014 Transaction ID : SA11AI.6289 |
| Mailing Address 6130 Balmoral | | Amount of Each Receipt this Period 750.00 Bi-weekly payroll deduction of \$125 per pay |
| City Dublin | State OH | Zip Code 43017 |
| FEC ID number of contributing federal political committee. C | Name of Employer Checksmart Financial LLC | |
| Occupation Senior Vice President of Marketing | | Aggregate Year-to-Date 2125.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3198.00 |
| 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: (check only one) | PAGE 16 OF 24 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Robert Rubestek
Full Name (Last, First, Middle Initial)

Mailing Address 1605 Clarence Avenue

City Lakewood State OH Zip Code 44107

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

Name of Employer Checksmart Financial LLC Occupation Regional Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **09 / 30 / 2014**

Transaction ID : SA11AI.6304

Amount of Each Receipt this Period **150.00**

Bi-weekly payroll deduction of \$25 per pay

B. Christjahn Schnucker
Full Name (Last, First, Middle Initial)

Mailing Address 5719 Laura Lane

City Hilliary State OH Zip Code 43026

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

Name of Employer Checksmart Financial LLC Occupation Sr. VP Risk Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3900.00**

Date of Receipt **09 / 30 / 2014**

Transaction ID : SA11AI.6285

Amount of Each Receipt this Period **1800.00**

Bi-weekly payroll deduction of \$300 per pay

C. Lance D. Solomon
Full Name (Last, First, Middle Initial)

Mailing Address 2847 Lochgreen Way

City Dublin State CA Zip Code 94568

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

Name of Employer Checksmart Financial LLC Occupation Vice President- Special Projects

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3541.61**

Date of Receipt **09 / 30 / 2014**

Transaction ID : SA11AI.6275

Amount of Each Receipt this Period **1249.98**

Bi-weekly payroll deduction of \$208.33 per pay

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3199.98 |
| 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: (check only one) | PAGE 17 OF 24 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

A. Enrico Torres
Full Name (Last, First, Middle Initial)

Mailing Address 3580 Ballantree Place

City State Zip Code
Dublin OH 43016

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

Name of Employer Occupation
Checksmart Financial LLC Director of Store Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3541.61

Date of Receipt
MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SA11AI.6276

Amount of Each Receipt this Period
1249.98

Bi-weekly payroll deduction of \$208.33 per pay

B. Lisa Vittorini
Full Name (Last, First, Middle Initial)

Mailing Address 4248 Vista Walk Lane

City State Zip Code
Powell OH 43065

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

Name of Employer Occupation
Checksmart Financial LLC Director of Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3400.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SA11AI.6284

Amount of Each Receipt this Period
1200.00

Bi-weekly payroll deduction of \$200 per pay

C. Timothy Winslow
Full Name (Last, First, Middle Initial)

Mailing Address 3127 Stouenburgh Dr

City State Zip Code
Hilliard OH 43026

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

Name of Employer Occupation
Checksmart Financial LLC Ass't General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2014

Transaction ID : SA11AI.6298

Amount of Each Receipt this Period
300.00

Bi-weekly payroll deduction of \$50 per pay

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2749.98 |
| 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: (check only one) | PAGE 18 OF 24 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Jerome Zingg | | Date of Receipt MM / DD / YYYY 09 / 30 / 2014 |
| Mailing Address 4670 Pine Tree Court | | Transaction ID : SA11AI.6290 |
| City Westerville | State OH | Zip Code 43082 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 630.00 |
| Name of Employer Checksmart Financial LLC | Occupation Senior VP Management Information Sys | Bi-weekly payroll deduction of \$105 per pay |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1780.00 | |

| | | |
|---|--------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial) B. | | Date of Receipt MM / DD / YYYY |
| Mailing Address | | Amount of Each Receipt this Period |
| City | State | Zip Code |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |

| | | |
|---|--------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial) C. | | Date of Receipt MM / DD / YYYY |
| Mailing Address | | Amount of Each Receipt this Period |
| City | State | Zip Code |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 630.00 |
| TOTAL This Period (last page this line number only).....▶ | 26323.04 |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Bank fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6326

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6327

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.6328

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Committee to Elect Chris Widener

Mailing Address 23 South Center Street
Suite 103

City Springfield State OH Zip Code 45502

Purpose of Disbursement
State Candidate Committee Contribution (Ohio)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : SB29.6341

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Committee to Elect Robert D. Hackett

Mailing Address 2050 Palouse Drive

City London State OH Zip Code 43140

Purpose of Disbursement
State Candidate Committee Contribution (Ohio)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 22 / 2014

Transaction ID : SB29.6333

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Conway Overly for Kentucky

Mailing Address P.O. Box 7803

City Louisville State KY Zip Code 40257

Purpose of Disbursement
State Candidate Committee Contribution (Kentucky)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2014

Transaction ID : SB29.6346

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. French for Justice

Mailing Address 100 South Third Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
State Candidate Committee Contribution (Ohio)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6330

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. French for Justice

Mailing Address 100 South Third Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
State Candidate Committee Contribution (Ohio)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6339

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Friends of Bill Coley

Mailing Address 8265 Cherry Laural Drive

City Middletown State OH Zip Code 45044

Purpose of Disbursement
State Candidate Committee Contribution (Ohio)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6340

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Faber

Mailing Address 7706 State Route 703

City State Zip Code
Celina OH 45822

Purpose of Disbursement
State Candidate Committee Contribution (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2014

Transaction ID : SB29.6329

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Josh Mandel for State Treasurer

Mailing Address 50 West Broad Street
Suite 1900

City State Zip Code
Columbus OH 43215

Purpose of Disbursement
State Candidate Committee Contribution (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB29.6342

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Mike DeWine for Ohio

Mailing Address 2587 Conlsey Road

City State Zip Code
Cedarville OH 45314

Purpose of Disbursement
State Candidate Committee Contribution (Ohio)

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2014

Transaction ID : SB29.6332

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

14000.00

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

A. Republican Party of Kentucky's House Trust

Mailing Address P.O. Box 1068

City Frankfort State KY Zip Code 40602

Purpose of Disbursement
State Candidate Committee Contribution (Kentucky)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.6344

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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