

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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

ADDRESS (number and street) C00322784
ERIC OSBORN
UNITED ASSOC LOCAL 50 PLUMBERS
& STEAMFITTERS POLITICAL ACTION FUND
7570 CAPLE BLVD SUITE A
NORTHWOOD OH 43819-1084

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

C 0 0 3 2 2 7 8 4

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|---|
| ☐ 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 / / 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 ERIC OSBORN

Signature of Treasurer



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							
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FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS POLITICAL ACTION FUND

Report Covering the Period:

From:

04 / 01 / 2012

To:

06 / 30 / 2012

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	2012	294086
(b) Cash on Hand at Beginning of Reporting Period.....	356403	
(c) Total Receipts (from Line 19)	401194	745011
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	757597	1039097
7. Total Disbursements (from Line 31)	555000	836500
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	202597	202597
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		



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)

Page 3

Write or Type Committee Name

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS POLITICAL ACTION FUND

Report Covering the Period: From:

04 / 01 / 2012

To:

06 / 30 / 2012

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).....▶

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. 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

(Dividends, Interest, etc.).....

18. 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)).....▶

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

4 0 1 1 9 4

4 0 1 1 9 4

4 0 1 1 9 4

4 0 1 1 9 4

4, 0 1 1 9 4

7 4 5 0 1 1

7 4 5 0 1 1

7 4 5 0 1 1

7 4 5 0 1 1

7, 4 5 0 1 1

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5 0 0 0 0	1 5 0 0 0 0
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements	5 0 5 0 0 0	6 8 6 5 0 0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5 5 5 0 0 0	8 3 6 5 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4 0 1 1 9 4	7 4 5 0 1 1
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4 0 1 1 9 4	7 4 5 0 1 1
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

12030840880

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1 OF 1
(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 (ht Full)

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. VOLUNTARY CONTRIBUTIONS REC'D VIA

Mailing Address

P/R DEDUCTIONS AGGREGATING LESS THAN

City State Zip Code

\$200.00 PER INDIV. PER CALENDAR YEAR

FEC ID number of contributing
federal political committee.

C

Name of Employr

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 1 2

Amount of Each Receipt this Period

1 2 6 4 9 9

Full Name (Last, First, Middle Initial)

B. VOLUNTARY CONTRIBUTIONS REC'D VIA

Mailing Address

P/R DEDUCTIONS AGGREGATING LESS THAN

City State Zip Code

\$200.00 PER INDIV. PER CALENDAR YEAR

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 6 / 2 0 1 2

Amount of Each Receipt this Period

1 4 1 1 6 4

Full Name (Last, First, Middle Initial)

C. VOLUNTARY CONTRIBUTIONS REC'D VIA

Mailing Address

P/R DEDUCTIONS AGGREGATING LESS THAN

City State Zip Code

\$200.00 PER INDIV. PER CALENDAR YEAR

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 2

Amount of Each Receipt this Period

1 3 3 5 3 1

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

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

4 0 1 1 9 4

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)

PAGE 1 OF 1

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (in Full)

FEDERAL CANDIDATES

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A.

KAPTUR FOR CONGRESS COMMITTEE

Mailing Address

PO BOX 899

City

State

Zip Code

TOLEDO OH 43697

Purpose of Disbursement

POL CONTRI UNITED STATES CONGRESS

Candidate Name

MARCY KAPTUR

0 1 1
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
0 4 0 5 2 0 1 2

Amount of Each Disbursement this Period

5 0 0 0 0 0

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

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

5 0 0 0 0 0

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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full) **NON-FEDERAL CANDIDATES**
UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A **CITIZENS WITH FEDOR**

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 2

Mailing Address
3220 N REACH DR

City State Zip Code

OREGON OH 43616

Purpose of Disbursement

POLI CONTRI OHIO STATE REPRESENTATIVE

Candidate Name
TERESA FEDOR

Category/
Type

Amount of Each Disbursement this Period

3 0 0 0 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B **FRIENDS & NEIGHBORS OF LINDSAY WEBB**

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 2

Mailing Address

3166 N REPUBLIC BLVD THOMAS JAFFEE, TREASURER

City State Zip Code

TOLEDO OH 43615

Purpose of Disbursement

POLI CONTRI TOLEDO CITY COUNCIL, DISTRICT 6

Candidate Name
LINDSAY WEBB

Category/
Type

Amount of Each Disbursement this Period

5 0 0 0 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. **WICKS FOR WOOD COUNTY**

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 2

Mailing Address

168 S MAIN ST LAURA WICKS, TREASURER

City State Zip Code

BOWLING GREEN OH 43402

Purpose of Disbursement

POLI CONTRI OHIO HOUSE OF REPRESENTATIVES, HD 3

Candidate Name
KELLY WICKS

Category/
Type

Amount of Each Disbursement this Period

2 5 0 0 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

1 0 5 0 0 0

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

12030840887

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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NON-FEDERAL CANDIDATES

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. LUCAS COUNTY YOUNG DEMOCRATS

Mailing Address

1817 MADISON AVENUE CARRIE RUSSELL, TREASURER

City State Zip Code

TOLEDO OH 43604

Purpose of Disbursement

POLITICAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 2

Amount of Each Disbursement this Period

1 5 0 0 0

B. RILEY FOR CITY COUNCIL

Mailing Address

3220 NORTH REACH DRIVE C/O LILA SHOUSER

City State Zip Code

OREGON OH 43616

Purpose of Disbursement

POLI CONTRI TOLEDO CITY COUNCIL

Candidate Name

TYRONE RILEY

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 2

Amount of Each Disbursement this Period

2 0 0 0 0

C. THARP FOR SHERIFF COMMITTEE

Mailing Address

6144 ROLLAND DRIVE KAREN POORE, TREASURER

City State Zip Code

TOLEDO OH 43612

Purpose of Disbursement

POLI CONTRI LUCAS COUNTY SHERIFF

Candidate Name

JOHN THARP

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 2

Amount of Each Disbursement this Period

1 5 0 0 0

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

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

5 0 0 0 0

12030840884

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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NON-FEDERAL CANDIDATES

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR ASHFORD

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 2

Mailing Address

2910 COLLINGWOOD CO-CHAIR WELDON DOUTHITT

City State Zip Code

TOLEDO OH 43610

Purpose of Disbursement

POLI CONTRI OHIO STATE REPRESENTATIVE

Candidate Name

MICHAEL ASHFORD

Category/
Type

Amount of Each Disbursement this Period

1 0 0 0 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. GRIFFITH FOR COMMISSIONER COMMITTEE

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 2

Mailing Address

1816 DARBYSHIRE KATHLEEN GOEDDE, TREASURER

City State Zip Code

DEFIANCE OH 43512

Purpose of Disbursement

POLI CONTRI DEFIANCE COUNTY COMMISSIONER

Candidate Name

BRENDA GRIFFITH

Category/
Type

Amount of Each Disbursement this Period

1 0 0 0 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT BOWMAN-ENGLISH

Date of Disbursement

M M / D D / Y Y Y Y
0 4 / 0 4 / 2 0 1 2

Mailing Address

6144 ROLLAND DRIVE KAREN POORE, TREASURER

City State Zip Code

TOLEDO OH 43612

Purpose of Disbursement

POLI CONTRI TOLEDO MUNICIPAL CLERK OF COURT

Candidate Name

VALLIE BOWMAN-ENGLISH

Category/
Type

Amount of Each Disbursement this Period

1 0 0 0 0

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

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

3 0 0 0 0

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)

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☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (in Full)

NON-FEDERAL CANDIDATES

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. NIEZGODSKI FOR STATE REPRESENTATIVE HD 7

Mailing Address

4942 SCENIC DRIVE THOMAS KROMKOWSKI, CHAIRMAN

City State Zip Code

SOUTH BEND IN 46619

Purpose of Disbursement

POLI CONTRI INDIANA STATE REPRESENTATIVE, DISTRICT 7

Candidate Name

DAVID NIEZGODSKI

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2012

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SKELDON WOZNAK

Mailing Address

1817 MADISON AVE JESSICA FORD, TREASURER

City State Zip Code

TOLEDO OH 43604

Purpose of Disbursement

POLI CONTRI LUCAS COUNTY COMMISSIONER

Candidate Name

TINA SKELDON WOZNAK

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2012

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MATT SZOLLOSI

Mailing Address

340 EAST FULTON STREET

City State Zip Code

COLUMBUS OH 43215

Purpose of Disbursement

POLI CONTRI OHIO STATE REPRESENTATIVE

Candidate Name

MATT SZOLLOSI

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2012

Amount of Each Disbursement this Period

1000.00

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

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

1,600.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (in Full)

NON-FEDERAL CANDIDATES

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. LUCAS COUNTY DEMOCRATIC PARTY

Mailing Address

1817 MADISON AVE KAREN POORE, TREASURER

City State Zip Code

TOLEDO OH 43604

Purpose of Disbursement

POLITICAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2012

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR FRED KEITH, JR

Mailing Address

117 SOUTH EAST STREET FRED KEITH, JR, TREASURER

City State Zip Code

BRADNER OH 43406

Purpose of Disbursement

POLITICAL CONTRIBUTION WOOD COUNTY COMMISSIONER

Candidate Name

FRED KEITH, JR

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2012

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SKELDON WOZNAK

Mailing Address

1817 MADISON AVE JESSICA FORD, TREASURER

City State Zip Code

TOLEDO OH 43604

Purpose of Disbursement

POLITICAL CONTRIBUTION LUCAS COUNTY COMMISSIONER

Candidate Name

TINA SKELDON WOZNAK

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2012

Amount of Each Disbursement this Period

400.00

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

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

1,350.00

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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 NUMBER:
(check only one)

PAGE 6 OF 6

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (in Full)	NON-FEDERAL CANDIDATES
UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND	

Full Name (Last, First, Middle Initial)		Date of Disbursement																					
A. HENRY COUNTY DEMOCRATIC PARTY		<table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	0	7	/	2	0	1	2
M	M	/	D	D	/	Y	Y	Y	Y														
0	6	/	0	7	/	2	0	1	2														
Mailing Address		Amount of Each Disbursement this Period																					
923 WOODLAWN KELLIE BURKHARDT, TREASURER																							
City	State Zip Code																						
NAPOLEON OH	43545																						
Purpose of Disbursement																							
POLITICAL CONTRIBUTION																							
Candidate Name																							
Office Sought:	Disbursement For:																						
☐ House	☐ Primary ☐ General																						
☐ Senate	☐ Other (specify) ▼																						
☐ President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		Date of Disbursement																					
B. LUCAS COUNTY YOUNG DEMOCRATS		<table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	0	7	/	2	0	1	2
M	M	/	D	D	/	Y	Y	Y	Y														
0	6	/	0	7	/	2	0	1	2														
Mailing Address		Amount of Each Disbursement this Period																					
1817 MADISON AVE CARRIE RUSSELL, TREASURER																							
City	State Zip Code																						
TOLEDO OH	43604																						
Purpose of Disbursement																							
POLITICAL CONTRIBUTION																							
Candidate Name																							
Office Sought:	Disbursement For:																						
☐ House	☐ Primary ☐ General																						
☐ Senate	☐ Other (specify) ▼																						
☐ President																							
State:	District:																						

Full Name (Last, First, Middle Initial)		Date of Disbursement																					
C.		<table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td>/</td><td></td><td></td><td>/</td><td></td><td></td><td></td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y			/			/				
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Mailing Address		Amount of Each Disbursement this Period																					
City	State Zip Code																						
Purpose of Disbursement																							
Candidate Name																							
Office Sought:	Disbursement For:																						
☐ House	☐ Primary ☐ General																						
☐ Senate	☐ Other (specify) ▼																						
☐ President																							
State:	District:																						

SUBTOTAL of Disbursements This Page (optional).....▶	2 5 0 0 0
TOTAL This Period (last page this line number only).....▶	5 0 5 0 0 0

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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Shipping Date

Next Business Day Delivery

☐☐

Received from House Records & Registration Office

Date of Receipt

☐

Received from Senate Public Records Office

Date of Receipt

☐

Received from Electronic Filing Office

Date of Receipt

☐

Other (Specify):

Date of Receipt or Postmarked

gr

7/13/12

PREPARER

DATE PREPARED

(3/2005)

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