

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
OHIOS FUTURE PAC

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		141001.79
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	102563.59									
(c) Total Receipts (from Line 19)	3395.88	132117.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	105959.47	273118.99								
7. Total Disbursements (from Line 31)	49764.62	216924.14								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56194.85	56194.85								
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
OHIOS FUTURE PAC

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

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	2148.08	115889.40
(i) Itemized (use Schedule A)		
(ii) Unitemized	670.00	2461.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	2818.08	118350.40
(b) Political Party Committees	577.80	4166.80
(c) Other Political Committees (such as PACs)	0.00	9600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	3395.88	132117.20
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))	3395.88	132117.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3395.88	132117.20

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) 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.....	20614.62	160774.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	20614.62	160774.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14900.00	26400.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
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.....	14250.00	29750.00
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))..	49764.62	216924.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49764.62	216924.14

DETAILED SUMMARY PAGE
of Disbursements

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)	3395.88	132117.20
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3395.88	132117.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	20614.62	160774.14
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20614.62	160774.14

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 34
(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)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial)
John M Tew

Mailing Address 8 Corbin Drive

City State Zip Code
Cincinnati OH 45208

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mayfield Group Physician

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81202.C380

Amount of Each Receipt this Period 250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Edgar E. Loyd

Mailing Address 1422 Hill Crest Rd

City State Zip Code
Cincinnati OH 45224-3230

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Chiquita Brands International Investor Relations

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81202.C381

Amount of Each Receipt this Period 50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Michael E. Hudkins

Mailing Address 371 Hathaway Dr

City State Zip Code
Cuyahoga Falls OH 44223-2882

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
None Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 8

Transaction ID: 81202.C369

Amount of Each Receipt this Period 250.00

Receipt

SUBTOTAL of Receipts This Page (optional) 550.00

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 7 / 34
	<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Judith Deeter		Date of Receipt
	Mailing Address 307 Wanoka Woods		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Terrace Park	OH	45174-1165
	FEC ID number of contributing federal political committee. C		Transaction ID: 81202.C375
Name of Employer None		Occupation Volunteer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	Receipt

B.	Full Name (Last, First, Middle Initial) Robert Schellhas		Date of Receipt
	Mailing Address 2639 N Roosevelt St		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Arlington	VA	22207-1011
	FEC ID number of contributing federal political committee. C		Transaction ID: 81202.C383
Name of Employer Citigroup Inc.		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	Receipt

C.	Full Name (Last, First, Middle Initial) Bradley Blakeman		Date of Receipt
	Mailing Address 6301 Chaucer Ln		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Alexandria	VA	22304-3537
	FEC ID number of contributing federal political committee. C		Transaction ID: 81202.C385
Name of Employer Kent Strategies LLC		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 34
	(check only one)	
<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Eric Toy		Date of Receipt
	Mailing Address 8495 Charleston Valley Drive		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mason	OH	45040
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer US Department of Commerce	Occupation Legislative Affairs Specialist	Transaction ID: 81203.C391
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="348.08"/>	
Aggregate Year-to-Date ▼ <input type="text" value="348.08"/>		In-Kind Unreimbursed Mileage	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="348.08"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2148.08"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 34

(check only one)

<input type="checkbox"/> 11a	<input checked="" 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)
OHIOS FUTURE PAC

A.

Full Name (Last, First, Middle Initial)
Hamilton County Republican Party

Mailing Address **700 Walnut Street
Suite 309**

City **Cincinnati** State **OH** Zip Code **45202**

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3166.80

Date of Receipt

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

Transaction ID: 81203.C390

Amount of Each Receipt this Period
577.80

In-Kind

Office Space 10/16-11/12/-08

SUBTOTAL of Receipts This Page (optional)	577.80
TOTAL This Period (last page this line number only)	577.80

**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 10 / 34

<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: 81203.E490 Date of Disbursement 10 / 15 / 2008
	Mailing Address 1591 Dalton Avenue	Amount of Each Disbursement this Period 10.70
	City Cincinnati State OH Zip Code 45234-	
	Purpose of Disbursement Postage	[MEMO ITEM] MEMO: POSTAGE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) US Postal Service	Transaction ID: 81013.E374 Date of Disbursement 10 / 20 / 2008
	Mailing Address 1591 Dalton Avenue	Amount of Each Disbursement this Period 6.24
	City Cincinnati State OH Zip Code 45234-	
	Purpose of Disbursement Postage	[MEMO ITEM] MEMO: POSTAGE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Andrew Ciafardini	Transaction ID: 81019.E395 Date of Disbursement 10 / 19 / 2008
	Mailing Address 10838 Lakehurst Court	Amount of Each Disbursement this Period 61.94
	City Cincinnati State OH Zip Code 45242-	
	Purpose of Disbursement Reimbursement (See Below)	REIMBURSEMENT (SEE BELOW)
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	61.94
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 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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 81019.E393
	Mailing Address 7800 Montgomery Road	Date of Disbursement 10 / 16 / 2008
	City Cincinnati State OH Zip Code 45236-	Amount of Each Disbursement this Period 3.99
	Purpose of Disbursement Meeting Refreshments	[MEMO ITEM] MEMO: MEETING REFRESHMENTS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Hamilton County Republican Party	Transaction ID: 81203.C390IK
	Mailing Address 700 Walnut Street Suite 309	Date of Disbursement 11 / 12 / 2008
	City Cincinnati State OH Zip Code 45202-	Amount of Each Disbursement this Period 577.80
	Purpose of Disbursement Office Space 10/16-11/12/08	IN KIND: OFFICE SPACE 10-16-11/12/08
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: 81202.E425
	Mailing Address 205 Pennsylvania Avenue SE	Date of Disbursement 11 / 18 / 2008
	City Washington State DC Zip Code 20003-	Amount of Each Disbursement this Period 2750.00
	Purpose of Disbursement Software License	SOFTWARE LICENSE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3327.80
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)

PAGE 12 / 34

<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)
OHIOS FUTURE PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Anthem BCBS OH</p> <p>Mailing Address PO Box 105095</p> <p>City Atlanta State GA Zip Code 30348-5095</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E424</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="205.98"/></p> <p>HEALTH INSURANCE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Andrew Ciafardini</p> <p>Mailing Address 10838 Lakehurst Court</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E419</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2201.33"/></p> <p>PAYROLL</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Eric Toy</p> <p>Mailing Address 8495 Charleston Valley Drive</p> <p>City Mason State OH Zip Code 45040-</p> <p>Purpose of Disbursement Unreimbursed Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81203.C3911K</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="348.08"/></p> <p>IN KIND: UNREIMBURSED MIL- EAGE</p>

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)

PAGE 13 / 34

<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)
OHIOS FUTURE PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) InFinTech</p> <p>Mailing Address 4010 Executive Park Drive Suite 300</p> <p>City Cincinnati State OH Zip Code 45241-</p> <p>Purpose of Disbursement Bankcard Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E478</p> <p>Date of Disbursement 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 19.99</p> <p>BANKCARD PROCESSING FEE</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Nancy R. Aichholz</p> <p>Mailing Address 8405 Indian Hill Road</p> <p>City Cincinnati State OH Zip Code 45243-</p> <p>Purpose of Disbursement Reimbursement (See Below)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E422</p> <p>Date of Disbursement 11 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 42.00</p> <p>REIMBURSEMENT (SEE BELOW)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) US Postal Service</p> <p>Mailing Address 1591 Dalton Avenue</p> <p>City Cincinnati State OH Zip Code 45234-</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E423</p> <p>Date of Disbursement 11 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 42.00</p> <p>[MEMO ITEM] MEMO: POSTAGE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

61.99

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 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

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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Susan B Keffer	Transaction ID: 81203.E494 Date of Disbursement 10 / 19 / 2008
	Mailing Address 705 Miami Avenue	Amount of Each Disbursement this Period 149.17
	City Terrace Park State OH Zip Code 45174-1222	
	Purpose of Disbursement Mileage Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MILEAGE REIMBURSEMENT

B.	Full Name (Last, First, Middle Initial) InFinTech	Transaction ID: 81202.E479 Date of Disbursement 11 / 03 / 2008
	Mailing Address 4010 Executive Park Drive Suite 300	Amount of Each Disbursement this Period 35.55
	City Cincinnati State OH Zip Code 45241-	
	Purpose of Disbursement Bankcard Processing Fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		BANKCARD PROCESSING FEE

C.	Full Name (Last, First, Middle Initial) Nancy R. Aichholz	Transaction ID: 81202.E420 Date of Disbursement 11 / 15 / 2008
	Mailing Address 8405 Indian Hill Road	Amount of Each Disbursement this Period 905.00
	City Cincinnati State OH Zip Code 45243-	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	1089.72
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)

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<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)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) Kevin Hoggatt</p> <p>Mailing Address 406 Williamsburg Court</p> <p>City Cincinnati State OH Zip Code 45215-</p> <p>Purpose of Disbursement Mileage Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E427</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="171.84"/></p> <p>MILEAGE REIMBURSEMENT</p>
<p>B. Full Name (Last, First, Middle Initial) Robert J Portman</p> <p>Mailing Address 203 Miami Ave</p> <p>City Terrace Park State OH Zip Code 45174-1142</p> <p>Purpose of Disbursement Reimbursement (See Below)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E428</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="320.07"/></p> <p>REIMBURSEMENT (SEE BELOW)</p>
<p>C. Full Name (Last, First, Middle Initial) InterContinental Miami</p> <p>Mailing Address 100 Chopin Plz</p> <p>City Miami State FL Zip Code 33131-4342</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E429</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="270.07"/></p> <p>[MEMO ITEM] MEMO: LODGING</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="491.91"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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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<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)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial) Andrew Ciafardini <hr/> Mailing Address 10838 Lakehurst Court <hr/> City Cincinnati State OH Zip Code 45242- <hr/> Purpose of Disbursement Reimbursement (See Below) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81202.E440 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 8
	Amount of Each Disbursement this Period 5476.26 REIMBURSEMENT (SEE BELOW)

B. Full Name (Last, First, Middle Initial) BP <hr/> Mailing Address 304 State Street <hr/> City Jeffersonville State OH Zip Code 43128- <hr/> Purpose of Disbursement Travel Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81202.E460 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8
	Amount of Each Disbursement this Period 81.83 [MEMO ITEM] MEMO: TRAVEL EXPENSE

C. Full Name (Last, First, Middle Initial) BP <hr/> Mailing Address 304 State Street <hr/> City Jeffersonville State OH Zip Code 43128- <hr/> Purpose of Disbursement Travel Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81202.E466 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8
	Amount of Each Disbursement this Period 90.99 [MEMO ITEM] MEMO: TRAVEL EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶	5476.26
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)

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<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) BP	Transaction ID: 81202.E470
	Mailing Address 304 State Street	Date of Disbursement 10 / 31 / 2008
	City Jeffersonville State OH Zip Code 43128-	Amount of Each Disbursement this Period 57.00
	Purpose of Disbursement Travel Expense	[MEMO ITEM] MEMO: TRAVEL EXPENSE
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Busken Bakery	Transaction ID: 81203.E483
	Mailing Address 2675 Madison Road	Date of Disbursement 11 / 04 / 2008
	City Cincinnati State OH Zip Code 45208-	Amount of Each Disbursement this Period 53.04
	Purpose of Disbursement Volunteer Refreshments	[MEMO ITEM] MEMO: VOLUNTEER REFRESHMENTS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Andrew Ciafardini	Transaction ID: 81202.E477
	Mailing Address 10838 Lakehurst Court	Date of Disbursement 11 / 22 / 2008
	City Cincinnati State OH Zip Code 45242-	Amount of Each Disbursement this Period 114.63
	Purpose of Disbursement Mileage Reimbursement	[MEMO ITEM] MEMO: MILEAGE REIMBURSEMENT
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

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<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)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) Cruise America</p> <p>Mailing Address 4287 Wade Mill Rd</p> <p>City Fairfield State OH Zip Code 45014-5851</p> <p>Purpose of Disbursement Vehicle Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E476</p> <p>Date of Disbursement 10 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 738.27</p> <p>[MEMO ITEM] MEMO: VEHICLE RENTAL</p>
<p>B. Full Name (Last, First, Middle Initial) Google, Inc.</p> <p>Mailing Address Department No 33654 PO Box 39000</p> <p>City San Francisco State CA Zip Code 94139-3181</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E453</p> <p>Date of Disbursement 11 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1574.32</p> <p>[MEMO ITEM] MEMO: ADVERTISING</p>
<p>C. Full Name (Last, First, Middle Initial) Hilton Garden Inn</p> <p>Mailing Address 959 Dover Rd</p> <p>City Wooster State OH Zip Code 44691-4105</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81203.E487</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 169.50</p> <p>[MEMO ITEM] MEMO: LODGING</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Hilton Garden Inn	Transaction ID: 81202.E465
	Mailing Address 959 Dover Rd	Date of Disbursement MM / DD / YYYY 10 / 22 / 2008
	City Wooster State OH Zip Code 44691-4105	Amount of Each Disbursement this Period 169.50
	Purpose of Disbursement Lodging	[MEMO ITEM] MEMO: LODGING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Holiday Inn	Transaction ID: 81202.E473
	Mailing Address 11 E Park Dr	Date of Disbursement MM / DD / YYYY 10 / 31 / 2008
	City Athens State OH Zip Code 45701-5001	Amount of Each Disbursement this Period 117.26
	Purpose of Disbursement Lodging	[MEMO ITEM] MEMO: LODGING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Holiday Inn	Transaction ID: 81202.E472
	Mailing Address 11 E Park Dr	Date of Disbursement MM / DD / YYYY 10 / 31 / 2008
	City Athens State OH Zip Code 45701-5001	Amount of Each Disbursement this Period 117.26
	Purpose of Disbursement Lodging	[MEMO ITEM] MEMO: LODGING
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

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<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Hyatt Hotel	Transaction ID: 81202.E451 Date of Disbursement 11 / 22 / 2008
	Mailing Address 350 N High St	Amount of Each Disbursement this Period 929.70
	City Columbus State OH Zip Code 43215-2006	
	Purpose of Disbursement Lodging	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: LODGING

B.	Full Name (Last, First, Middle Initial) Kroger	Transaction ID: 81202.E459 Date of Disbursement 10 / 20 / 2008
	Mailing Address 5575 E Galbraith Rd	Amount of Each Disbursement this Period 28.71
	City Cincinnati State OH Zip Code 45236-2827	
	Purpose of Disbursement Meal Expense	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: MEAL EXPENSE

C.	Full Name (Last, First, Middle Initial) Kroger	Transaction ID: 81202.E444 Date of Disbursement 11 / 03 / 2008
	Mailing Address 5575 E Galbraith Rd	Amount of Each Disbursement this Period 34.31
	City Cincinnati State OH Zip Code 45236-2827	
	Purpose of Disbursement Volunteer Refreshments	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: VOLUNTEER REFRESHMENTS

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

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<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Mailstreet	Transaction ID: 81202.E457 Date of Disbursement																			
	Mailing Address PO Box 673942	<table border="1"><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>1</td><td>1</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	6	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	6	/	2	0	0	8												
	City Detroit State MI Zip Code 48267-0001	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Email Services	<table border="1"><tr><td>39.80</td></tr></table>	39.80																		
39.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:	[MEMO ITEM] MEMO: EMAIL SERVICES																			

B.	Full Name (Last, First, Middle Initial) Mailstreet	Transaction ID: 81202.E452 Date of Disbursement																			
	Mailing Address PO Box 673942	<table border="1"><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>1</td><td>0</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	9	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	0	9	/	2	0	0	8												
	City Detroit State MI Zip Code 48267-0001	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Email Services	<table border="1"><tr><td>39.80</td></tr></table>	39.80																		
39.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:	[MEMO ITEM] MEMO: EMAIL SERVICES																			

C.	Full Name (Last, First, Middle Initial) Sprint	Transaction ID: 81202.E455 Date of Disbursement																			
	Mailing Address 2001 Edmund Halley Drive	<table border="1"><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>1</td><td>0</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	2	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	2	/	2	0	0	8												
	City Reston State VA Zip Code 20191-	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Cell Phone Service	<table border="1"><tr><td>83.99</td></tr></table>	83.99																		
83.99																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:	[MEMO ITEM] MEMO: CELL PHONE SERVICE																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

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

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)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) Sprint</p> <p>Mailing Address 2001 Edmund Halley Drive</p> <p>City Reston State VA Zip Code 20191-</p> <p>Purpose of Disbursement Cell Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E462 Date of Disbursement 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 83.99</p> <p>[MEMO ITEM] MEMO: CELL PHONE SERVICE</p>
<p>B. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 7800 Montgomery Road</p> <p>City Cincinnati State OH Zip Code 45236-</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E454 Date of Disbursement 11 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 116.51</p> <p>[MEMO ITEM] MEMO: OFFICE SUPPLIES</p>
<p>C. Full Name (Last, First, Middle Initial) Susan B Keffer</p> <p>Mailing Address 705 Miami Avenue</p> <p>City Terrace Park State OH Zip Code 45174-1222</p> <p>Purpose of Disbursement Reimbursement (See Below)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E433 Date of Disbursement 11 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 919.58</p> <p>REIMBURSEMENT (SEE BELOW)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

919.58

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 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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Busken Bakery	Transaction ID: 81203.E486 Date of Disbursement 10 / 29 / 2008
	Mailing Address 2675 Madison Road	Amount of Each Disbursement this Period 168.75
	City Cincinnati State OH Zip Code 45208-	
	Purpose of Disbursement Volunteer Refreshments	[MEMO ITEM] MEMO: VOLUNTEER REFRESHMENTS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Busken Bakery	Transaction ID: 81203.E484 Date of Disbursement 10 / 26 / 2008
	Mailing Address 2675 Madison Road	Amount of Each Disbursement this Period 281.25
	City Cincinnati State OH Zip Code 45208-	
	Purpose of Disbursement Volunteer Refreshments	[MEMO ITEM] MEMO: VOLUNTEER REFRESHMENTS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Busken Bakery	Transaction ID: 81203.E485 Date of Disbursement 10 / 20 / 2008
	Mailing Address 2675 Madison Road	Amount of Each Disbursement this Period 84.37
	City Cincinnati State OH Zip Code 45208-	
	Purpose of Disbursement Volunteer Refreshments	[MEMO ITEM] MEMO: VOLUNTEER REFRESHMENTS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

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<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)
OHIOS FUTURE PAC

A.

Full Name (Last, First, Middle Initial)
Susan B Keffer

Mailing Address 705 Miami Avenue

City Terrace Park State OH Zip Code 45174-1222

Purpose of Disbursement
Mileage Reimbursement
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 81202.E432
Date of Disbursement

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

Amount of Each Disbursement this Period

355.68

[MEMO ITEM]

MEMO: MILEAGE REIMBURSEMENT

B.

Full Name (Last, First, Middle Initial)
Artistic Embroidery Inc

Mailing Address 811 Lexington Ave

City Terrace Park State OH Zip Code 45174-1219

Purpose of Disbursement
PAC Apparel
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 81202.E418
Date of Disbursement

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

Amount of Each Disbursement this Period

455.29

PAC APPAREL

C.

Full Name (Last, First, Middle Initial)
Loud & Clear Inc.

Mailing Address 2001 Dalton Ave Ste 201
Suite 201

City Cincinnati State OH Zip Code 45214-2045

Purpose of Disbursement
Event expense
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 81202.E431
Date of Disbursement

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

Amount of Each Disbursement this Period

329.08

EVENT EXPENSE

SUBTOTAL of Disbursements This Page (optional)

784.37

TOTAL This Period (last page this line number only)

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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)

<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)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) Andrew Ciafardini</p> <p>Mailing Address 10838 Lakehurst Court</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Reimbursement (See Below)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81019.E384 Date of Disbursement 10 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1640.32</p> <p>REIMBURSEMENT (SEE BELOW)</p>
<p>B. Full Name (Last, First, Middle Initial) Google, Inc.</p> <p>Mailing Address Department No 33654 PO Box 39000</p> <p>City San Francisco State CA Zip Code 94139-3181</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81019.E391 Date of Disbursement 10 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 568.02</p> <p>[MEMO ITEM] MEMO: ADVERTISING</p>
<p>C. Full Name (Last, First, Middle Initial) Google, Inc.</p> <p>Mailing Address Department No 33654 PO Box 39000</p> <p>City San Francisco State CA Zip Code 94139-3181</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81019.E401 Date of Disbursement 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 406.47</p> <p>[MEMO ITEM] MEMO: ADVERTISING</p>

SUBTOTAL of Disbursements This Page (optional)	1640.32
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)

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<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Google, Inc.	Transaction ID: 81019.E400 Date of Disbursement 10 / 01 / 2008
	Mailing Address Department No 33654 PO Box 39000	Amount of Each Disbursement this Period 204.81
	City San Francisco State CA Zip Code 94139-3181	
	Purpose of Disbursement Advertising Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: ADVERTISING

B.	Full Name (Last, First, Middle Initial) Google, Inc.	Transaction ID: 81019.E383 Date of Disbursement 09 / 25 / 2008
	Mailing Address Department No 33654 PO Box 39000	Amount of Each Disbursement this Period 66.86
	City San Francisco State CA Zip Code 94139-3181	
	Purpose of Disbursement Advertising Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: ADVERTISING

C.	Full Name (Last, First, Middle Initial) Kroger	Transaction ID: 81019.E388 Date of Disbursement 09 / 28 / 2008
	Mailing Address 5575 E Galbraith Rd	Amount of Each Disbursement this Period 74.88
	City Cincinnati State OH Zip Code 45236-2827	
	Purpose of Disbursement Meeting Refreshments Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] MEMO: MEETING REFRESHMENTS

SUBTOTAL of Disbursements This Page (optional)	0.00
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 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)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) Kroger</p> <p>Mailing Address 5575 E Galbraith Rd</p> <p>City Cincinnati State OH Zip Code 45236-2827</p> <p>Purpose of Disbursement Meeting Refreshments</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81019.E389</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="63.76"/></p> <p>[MEMO ITEM] MEMO: MEETING REFRESHMENTS</p>
<p>B. Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address 5897 Pfeiffer Road</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81019.E386</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15.19"/></p> <p>[MEMO ITEM] MEMO: OFFICE SUPPLIES</p>
<p>C. Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address 5897 Pfeiffer Road</p> <p>City Cincinnati State OH Zip Code 45242-</p> <p>Purpose of Disbursement Office Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81019.E385</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="57.41"/></p> <p>[MEMO ITEM] MEMO: OFFICE EQUIPMENT</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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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<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 81012.E279 Date of Disbursement 10 / 02 / 2008
	Mailing Address 7800 Montgomery Road	Amount of Each Disbursement this Period 75.40
	City Cincinnati State OH Zip Code 45236-	
	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) US Internal Revenue Service	Transaction ID: 81202.E481 Date of Disbursement 11 / 24 / 2008
	Mailing Address Department of Treasury	Amount of Each Disbursement this Period 1050.00
	City Cincinnati State OH Zip Code 45999-0005	
	Purpose of Disbursement Payroll Taxes	PAYROLL TAXES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) US Internal Revenue Service	Transaction ID: 81202.E480 Date of Disbursement 10 / 18 / 2008
	Mailing Address Department of Treasury	Amount of Each Disbursement this Period 2614.75
	City Cincinnati State OH Zip Code 45999-0005	
	Purpose of Disbursement Payroll Taxes	PAYROLL TAXES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3664.75
TOTAL This Period (last page this line number only)	20274.03

**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 29 / 34

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) Chabot for Congress</p> <p>Mailing Address 3341 Harrison Avenue</p> <p>City Cincinnati State OH Zip Code 45211-</p> <p>Purpose of Disbursement CONTRIBUTION (G08)</p> <p>Candidate Name STEVE CHABOT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81019.E404</p> <p>Date of Disbursement 10 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1700.00</p> <p>CONTRIBUTION (G08)</p>
<p>B. Full Name (Last, First, Middle Initial) Ohio Republican Party</p> <p>Mailing Address 211 S 5th St</p> <p>City Columbus State OH Zip Code 43215-5203</p> <p>Purpose of Disbursement LEGACY FUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E411</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>LEGACY FUND</p>
<p>C. Full Name (Last, First, Middle Initial) Schmidt for Congress</p> <p>Mailing Address 771 Wards Corner Road</p> <p>City Loveland State OH Zip Code 45140-</p> <p>Purpose of Disbursement CONTRIBUTION (G08)</p> <p>Candidate Name JEANNETTE H SCHMIDT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E406</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>CONTRIBUTION (G08)</p>

SUBTOTAL of Disbursements This Page (optional)	8700.00
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 checked="" 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)
OHIOS FUTURE PAC

<p>A. Full Name (Last, First, Middle Initial) Schuring for Congress</p> <p>Mailing Address 400 Market Ave N Ste 400 Suite 400</p> <p>City Canton State OH Zip Code 44702-1553</p> <p>Purpose of Disbursement CONTRIBUTION (G08)</p> <p>Candidate Name KIRK SCHURING</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 16</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E407</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>CONTRIBUTION (G08)</p>
<p>B. Full Name (Last, First, Middle Initial) Stivers for Congress</p> <p>Mailing Address 211 S. Fifth Street</p> <p>City Columbus State OH Zip Code 43215-</p> <p>Purpose of Disbursement CONTRIBUTION (G08)</p> <p>Candidate Name STEVE STIVERS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 15</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E408</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 2700.00</p> <p>CONTRIBUTION (G08)</p>
<p>C. Full Name (Last, First, Middle Initial) Trakas for Congress</p> <p>Mailing Address c/o The Paroska Group 1500 West Third Street</p> <p>City Cleveland State OH Zip Code 44113-</p> <p>Purpose of Disbursement G08 US HOUSE OH-10</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81202.E416</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>G08 US HOUSE OH-10</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>6200.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>14900.00</p>

**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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Citizens for Carol-Ann Schindel	Transaction ID: 81202.E414
	Mailing Address 8705 Cliffwood Ct	Date of Disbursement 10 / 24 / 2008
	City Mentor State OH Zip Code 44060-2216	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement OHIO HOUSE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Citizens for Kevin Bacon	Transaction ID: 81202.E415
	Mailing Address 5325 Ponderosa Dr	Date of Disbursement 10 / 24 / 2008
	City Columbus State OH Zip Code 43231-4033	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement OHIO HOUSE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Republican Senate Campaign Committee	Transaction ID: 81012.E259
	Mailing Address 211 South Fifth Street	Date of Disbursement 10 / 20 / 2008
	City Columbus State OH Zip Code 43215-	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CONTRIBUTION TO OHIO SENATE FUND	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2000.00
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)

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<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Committee to Elect Dick McCarthy	Transaction ID: 81202.E413 Date of Disbursement
	Mailing Address PO Box 9002	<input type="text" value="10"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Youngstown State OH Zip Code 44513-0002	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION OHIO 59	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Committee to ReElect Judge Nelson	Transaction ID: 81203.E493 Date of Disbursement
	Mailing Address PO Box 1041	<input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Cincinnati State OH Zip Code 45201-1041	Amount of Each Disbursement this Period
	Purpose of Disbursement LOCAL CANDIDATE CONTRIBUTION	<input type="text" value="250.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Committee to Elect Keenan	Transaction ID: 81202.E410 Date of Disbursement
	Mailing Address 865 Macon Aly	<input type="text" value="10"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Columbus State OH Zip Code 43206-2652	Amount of Each Disbursement this Period
	Purpose of Disbursement OHIO HOUSE	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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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<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)
OHIOS FUTURE PAC

A.	Full Name (Last, First, Middle Initial) Ohio House Republican Campaign Committee	Transaction ID: 81202.E412 Date of Disbursement
	Mailing Address 100 E Broad St Ste 2225 Suite 2225	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City Columbus State OH Zip Code 43215-3641	Amount of Each Disbursement this Period
	Purpose of Disbursement STATE LEGISLATIVE CAMPAIGN FUND	<input type="text" value="10000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Committee to Elect Snitchler 08	Transaction ID: 81202.E409 Date of Disbursement
	Mailing Address PO Box 1255	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City Uniontown State OH Zip Code 44685-1255	Amount of Each Disbursement this Period
	Purpose of Disbursement OHIO HOUSE	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Stratton for Supreme Court	Transaction ID: 81203.E492 Date of Disbursement
	Mailing Address 260 N Cassady Avenue	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Columbus State OH Zip Code 43209-	Amount of Each Disbursement this Period
	Purpose of Disbursement OHIO SUPREME COURT	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="11000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="14250.00"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 34 / 34	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
OHIOS FUTURE PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrew Ciafardini			Nature of Debt (Purpose): Reimbursement (See Below)
Mailing Address 10838 Lakehurst Court			
City Cincinnati	State OH	ZIP Code 45242-	

Outstanding Balance Beginning This Period		Transaction ID: LS81019.E384	
1640.32			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	1640.32	0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	0.00