

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
McDonald Hopkins LLC PAC

ADDRESS (number and street) 600 Superior Avenue Suite 2100  
Check if different than previously reported. (ACC) Cleveland OH 44114

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00394460 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 M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 01 / 01 / 2024 through M M / D D / Y Y Y Y Y Y 03 / 31 / 2024

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 Kall, David, M., ,

Signature of Treasurer Kall, David, M., , Date M M / D D / Y Y Y Y Y Y 04 / 12 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

McDonald Hopkins LLC PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2024"/>		<input type="text" value="58205.84"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="58205.84"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="8355.77"/>	<input type="text" value="8355.77"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="66561.61"/>	<input type="text" value="66561.61"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9874.82"/>	<input type="text" value="9874.82"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="56686.79"/>	<input type="text" value="56686.79"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

McDonald Hopkins LLC PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

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).....	6253.10	6253.10
(ii) Unitemized .....	2102.67	2102.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8355.77	8355.77
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	8355.77	8355.77
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	8355.77	8355.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8355.77	8355.77

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4624.82	4624.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4624.82	4624.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	5250.00	5250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9874.82	9874.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9874.82	9874.82

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8355.77	8355.77
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8355.77	8355.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4624.82	4624.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4624.82	4624.82

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BAUMGARTNER, TODD, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 29 / 2024 <b>Transaction ID : A2024-524184</b>		
Mailing Address MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100			Amount of Each Receipt this Period 83.37		
City CLEVELAND	State OH	Zip Code 44114	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 250.11		
Name of Employer (for Individual) McDonald Hopkins LLC		Occupation (for Individual) Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BEASLEY, TERESA, , ,</b>			Date of Receipt MM / DD / YYYY 01 / 31 / 2024 <b>Transaction ID : A2024-92198</b>		
Mailing Address MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100			Amount of Each Receipt this Period 250.00		
City CLEVELAND	State OH	Zip Code 44114	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 250.00		
Name of Employer (for Individual) McDonald Hopkins LLC		Occupation (for Individual) Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BEASLEY, TERESA, , ,</b>			Date of Receipt MM / DD / YYYY 02 / 29 / 2024 <b>Transaction ID : A2024-325153</b>		
Mailing Address MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100			Amount of Each Receipt this Period 250.00		
City CLEVELAND	State OH	Zip Code 44114	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00		
Name of Employer (for Individual) McDonald Hopkins LLC		Occupation (for Individual) Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	583.37
<b>TOTAL</b> 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 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BEASLEY, TERESA, , ,**

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**

City **CLEVELAND** State **OH** Zip Code **44114**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **03 / 29 / 2024**

**Transaction ID : A2024-524164**

Amount of Each Receipt this Period **250.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BENKO, JOHN, E, ,**

Mailing Address **MCDONALD HOPKINS LLC 39533 WOODWAR STE 318**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48304**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.11**

Date of Receipt **03 / 29 / 2024**

**Transaction ID : A2024-524165**

Amount of Each Receipt this Period **83.37**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BERNHARDT, PETER, M, ,**

Mailing Address **MCDONALD HOPKINS LLC 505 SOUTH FLA STE 300**

City **WEST PALM BEACH** State **FL** Zip Code **33401**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **01 / 31 / 2024**

**Transaction ID : A2024-92200**

Amount of Each Receipt this Period **250.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>583.37</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 20  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BERNHARDT, PETER, M, ,**

Mailing Address **MCDONALD HOPKINS LLC 505 SOUTH FLA  
STE 300**

City **WEST PALM BEACH**    State **FL**    Zip Code **33401**

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

Name of Employer (for Individual) **McDonald Hopkins LLC**    Occupation (for Individual) **Attorney**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**02 / 29 / 2024**  
**Transaction ID : A2024-325155**

Amount of Each Receipt this Period  
**250.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BERNHARDT, PETER, M, ,**

Mailing Address **MCDONALD HOPKINS LLC 505 SOUTH FLA  
STE 300**

City **WEST PALM BEACH**    State **FL**    Zip Code **33401**

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

Name of Employer (for Individual) **McDonald Hopkins LLC**    Occupation (for Individual) **Attorney**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
**03 / 29 / 2024**  
**Transaction ID : A2024-524166**

Amount of Each Receipt this Period  
**250.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CARMEL, MARC, , ,**

Mailing Address **MCDONALD HOPKINS LLC 300 NORTH LAS**

City **CHICAGO**    State **IL**    Zip Code **60654**

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

Name of Employer (for Individual) **McDonald Hopkins LLC**    Occupation (for Individual) **Executive**

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**01 / 31 / 2024**  
**Transaction ID : A2024-92202**

Amount of Each Receipt this Period  
**250.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **750.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 20  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CARMEL, MARC, , ,**

Mailing Address **MCDONALD HOPKINS LLC 300 NORTH LAS**

City **CHICAGO** State **IL** Zip Code **60654**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Executive**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**02 / 29 / 2024**  
**Transaction ID : A2024-325157**

Amount of Each Receipt this Period  
**250.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CARMEL, MARC, , ,**

Mailing Address **MCDONALD HOPKINS LLC 300 NORTH LAS**

City **CHICAGO** State **IL** Zip Code **60654**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Executive**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
**03 / 29 / 2024**  
**Transaction ID : A2024-524168**

Amount of Each Receipt this Period  
**250.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CONTINI, CHRISTAL, , ,**

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR  
STE 2100**

City **CLEVELAND** State **OH** Zip Code **44114**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **ASSOCIATE**

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**01 / 31 / 2024**  
**Transaction ID : A2024-92203**

Amount of Each Receipt this Period  
**250.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **750.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

**A. CONTINI, CHRISTAL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**

City **CLEVELAND** State **OH** Zip Code **44114**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **ASSOCIATE**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **02 / 29 / 2024**  
**Transaction ID : A2024-325158**

Amount of Each Receipt this Period **250.00**

Memo Item

**B. CONTINI, CHRISTAL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**

City **CLEVELAND** State **OH** Zip Code **44114**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **ASSOCIATE**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **03 / 29 / 2024**  
**Transaction ID : A2024-524169**

Amount of Each Receipt this Period **250.00**

Memo Item

**C. CUPAR, DAVID, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**

City **CLEVELAND** State **OH** Zip Code **44114**

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

Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 29 / 2024**  
**Transaction ID : A2024-524170**

Amount of Each Receipt this Period **100.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 11 OF 20
(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)  
**McDonald Hopkins LLC PAC**

**A. GUNNING II, DAVID, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**  
 City **CLEVELAND** State **OH** Zip Code **44114**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **01 / 31 / 2024**  
**Transaction ID : A2024-92207**  
 Amount of Each Receipt this Period **500.00**  
 Memo Item

**B. GUNNING II, DAVID, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**  
 City **CLEVELAND** State **OH** Zip Code **44114**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **02 / 29 / 2024**  
**Transaction ID : A2024-325162**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

**C. GUNNING II, DAVID, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**  
 City **CLEVELAND** State **OH** Zip Code **44114**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **03 / 29 / 2024**  
**Transaction ID : A2024-524173**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. LATIFF, MICHAEL, G, ,</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2024</b>		
Mailing Address <b>MCDONALD HOPKINS LLC 39533 WOODWAR STE 318</b>			<b>Transaction ID : A2024-92208</b>		
City <b>BLOOMFIELD HILLS</b>	State <b>MI</b>	Zip Code <b>48304</b>	Amount of Each Receipt this Period <b>250.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) <b>McDonald Hopkins LLC</b>		Occupation (for Individual) <b>Attorney</b>	Aggregate Year-to-Date ▼ <b>250.00</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. LATIFF, MICHAEL, G, ,</b>			Date of Receipt MM / DD / YYYY <b>02 / 29 / 2024</b>		
Mailing Address <b>MCDONALD HOPKINS LLC 39533 WOODWAR STE 318</b>			<b>Transaction ID : A2024-325163</b>		
City <b>BLOOMFIELD HILLS</b>	State <b>MI</b>	Zip Code <b>48304</b>	Amount of Each Receipt this Period <b>250.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) <b>McDonald Hopkins LLC</b>		Occupation (for Individual) <b>Attorney</b>	Aggregate Year-to-Date ▼ <b>500.00</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. LATIFF, MICHAEL, G, ,</b>			Date of Receipt MM / DD / YYYY <b>03 / 29 / 2024</b>		
Mailing Address <b>MCDONALD HOPKINS LLC 39533 WOODWAR STE 318</b>			<b>Transaction ID : A2024-524174</b>		
City <b>BLOOMFIELD HILLS</b>	State <b>MI</b>	Zip Code <b>48304</b>	Amount of Each Receipt this Period <b>250.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item		
Name of Employer (for Individual) <b>McDonald Hopkins LLC</b>		Occupation (for Individual) <b>Attorney</b>	Aggregate Year-to-Date ▼ <b>750.00</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 20
	<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)  
**McDonald Hopkins LLC PAC**

**A. LOWE, TIMOTHY, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **MCDONALD HOPKINS LLC 39533 WOODWAR STE 318**  
 City **BLOOMFIELD HILLS** State **MI** Zip Code **48304**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.02**

Date of Receipt **03 / 29 / 2024**  
**Transaction ID : A2024-524176**  
 Amount of Each Receipt this Period **83.34**  
 Memo Item

**B. METZGER, JOHN, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **MCDONALD HOPKINS LLC 505 SOUTH FLA STE 300**  
 City **WEST PALM BEACH** State **FL** Zip Code **33401**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **01 / 31 / 2024**  
**Transaction ID : A2024-92212**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

**C. METZGER, JOHN, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **MCDONALD HOPKINS LLC 505 SOUTH FLA STE 300**  
 City **WEST PALM BEACH** State **FL** Zip Code **33401**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **02 / 29 / 2024**  
**Transaction ID : A2024-325167**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>583.34</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. METZGER, JOHN, T, ,</b>		Date of Receipt MM / DD / YYYY 03 / 29 / 2024 <b>Transaction ID : A2024-524178</b>
Mailing Address MCDONALD HOPKINS LLC 505 SOUTH FLA STE 300		Amount of Each Receipt this Period 250.00
City WEST PALM BEACH	State FL	Zip Code 33401
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) McDonald Hopkins LLC	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. STIEF, JAMES, E, ,</b>		Date of Receipt MM / DD / YYYY 03 / 29 / 2024 <b>Transaction ID : A2024-524181</b>
Mailing Address MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100		Amount of Each Receipt this Period 100.00
City CLEVELAND	State OH	Zip Code 44114
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) McDonald Hopkins LLC	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Wardega, Frank, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 29 / 2024 <b>Transaction ID : A2024-325170</b>
Mailing Address MCDONALD HOPKINS LLC 600 SUPERIOR		Amount of Each Receipt this Period 101.51
City CLEVELAND	State OH	Zip Code 44114
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) McDonald Hopkins LLC	Occupation (for Individual) Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 203.02	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 15 OF 20
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**McDonald Hopkins LLC PAC**

**A. Wardega, Frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR**  
 City **CLEVELAND** State **OH** Zip Code **44114**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Executive**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **304.53**

Date of Receipt **03 / 29 / 2024**  
**Transaction ID : A2024-524182**  
 Amount of Each Receipt this Period **101.51**  
 Memo Item

**B. WISE, MICHAEL, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **MCDONALD HOPKINS LLC 600 SUPERIOR STE 2100**  
 City **CLEVELAND** State **OH** Zip Code **44114**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **McDonald Hopkins LLC** Occupation (for Individual) **Attorney**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 29 / 2024**  
**Transaction ID : A2024-524183**  
 Amount of Each Receipt this Period **100.00**  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>201.51</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>6253.10</b>

# 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"/> 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)  
**McDonald Hopkins LLC PAC**

**A. Public Affairs Support Services Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1950 Roland Clarke Place Suite 300

City Reston State VA Zip Code 20191

Purpose of Disbursement Compliance/reporting/filing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District: Not Applicable

Date of Disbursement: 01 / 17 / 2024

FEC Identification Number: C

Transaction ID : B863853

Amount of Each Disbursement this Period: 1413.92

Memo Item

**B. Public Affairs Support Services Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1950 Roland Clarke Place Suite 300

City Reston State VA Zip Code 20191

Purpose of Disbursement Compliance/reporting/filing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District: Not Applicable

Date of Disbursement: 02 / 15 / 2024

FEC Identification Number: C

Transaction ID : B865812

Amount of Each Disbursement this Period: 1805.68

Memo Item

**C. Public Affairs Support Services Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1950 Roland Clarke Place Suite 300

City Reston State VA Zip Code 20191

Purpose of Disbursement Compliance/reporting/filing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District: Not Applicable

Date of Disbursement: 03 / 12 / 2024

FEC Identification Number: C

Transaction ID : B867592

Amount of Each Disbursement this Period: 1405.22

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4624.82
<b>TOTAL</b> This Period (last page this line number only).....▶	4624.82



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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)

McDonald Hopkins LLC PAC

Full Name (Last, First, Middle Initial)

A. Christina Lambert Campaign

Mailing Address 500 Churchill Road

City West Palm Beach

State FL

Zip Code 33405

Purpose of Disbursement G-2024 City Comm. 05 FL

011 Category/Type

Candidate Name Lambert, Christina, , ,

Office Sought: House, Senate, President. State: FL District: 05

Disbursement For: 2024. Primary, General, Other (specify)

Date of Disbursement

02 / 27 / 2024

FEC Identification Number

C

Transaction ID : B866733

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Douglas Leifert for County Court Judge - Group 2

Mailing Address 2160 W Atlantic Ave

City Delray Beach

State FL

Zip Code 33445

Purpose of Disbursement P-2024 Co. Judge Palm Beach County FL

011 Category/Type

Candidate Name Leifert, Douglas, I, ,

Office Sought: House, Senate, President. State: FL District:

Disbursement For: 2024. Primary, General, Other (specify)

Date of Disbursement

03 / 12 / 2024

FEC Identification Number

C

Transaction ID : B867591

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Bradley Inaugural Committee

Mailing Address 1358 West 2nd St.

City Lorain

State OH

Zip Code 44052

Purpose of Disbursement Local Inaugural Cmte

011 Category/Type

Candidate Name

Office Sought: House, Senate, President. State: District:

Disbursement For: 2024. Primary, General, Other (specify) Not Applicable

Date of Disbursement

01 / 12 / 2024

FEC Identification Number

C

Transaction ID : B863772

Amount of Each Disbursement this Period

250.00

Memo Item

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

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

2250.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

**McDonald Hopkins LLC PAC**

Full Name (Last, First, Middle Initial)

### A. Jack Bradley Inaugural Mayoral Cmte

Mailing Address 1358 West 2nd St.

City  
Lorain

State  
OH

Zip Code  
44052

Purpose of Disbursement

Local Inaugural Cmte

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼  
 Not Applicable

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B863928**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### B. Demetriou for Ohio

Mailing Address 8472 E. Washington Street Suite 22

City  
Chagrin Falls

State  
OH

Zip Code  
44023

Purpose of Disbursement

P-2024 State House 35 OH

Candidate Name

Demetriou, Steve, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: OH District: 35

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B863802**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### C. Citizens to Elect Eric Synenberg

Mailing Address 2429 Beachwood Drive

City  
Beachwood

State  
OH

Zip Code  
44122

Purpose of Disbursement

P-2024 State House 21 OH

Candidate Name

Synenberg, Eric, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: OH District: 21

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B863938**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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

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)

**McDonald Hopkins LLC PAC**

Full Name (Last, First, Middle Initial)

**A. Donnelly for Supreme Court**

Mailing Address 545 E. Town Street

City  
Columbus

State  
OH

Zip Code  
43215

Purpose of Disbursement  
P-2024 State Supreme Court Ohio OH

011  
Category/  
Type

Candidate Name  
Donnelly, Michael, P, ,

Office Sought:  House  
 Senate  
 President  
State: OH District:

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	24	/	2024

FEC Identification Number

C [Redacted]

Transaction ID : B864191

Amount of Each Disbursement this Period

[Redacted] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Committee to Elect J.P. Dutton**

Mailing Address P.O. Box 506

City  
St. Clairsville

State  
OH

Zip Code  
43950

Purpose of Disbursement  
P-2024 Co. Comm. Belmont OH

011  
Category/  
Type

Candidate Name  
Dutton, J.P., , ,

Office Sought:  House  
 Senate  
 President  
State: OH District:

Disbursement For: 2024  
 Primary  General  
 Other (specify)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2024

FEC Identification Number

C [Redacted]

Transaction ID : B866860

Amount of Each Disbursement this Period

[Redacted] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Josh Meyer for Commissioner**

Mailing Address 3425 Clinton St.

City  
Bellaire

State  
OH

Zip Code  
43906

Purpose of Disbursement  
P-2024 Co. Comm. Belmont OH

011  
Category/  
Type

Candidate Name  
Meyer, Josh, , ,

Office Sought:  House  
 Senate  
 President  
State: OH District:

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2024

FEC Identification Number

C [Redacted]

Transaction ID : B866861

Amount of Each Disbursement this Period

[Redacted] 500.00

Memo Item

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

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

[Redacted] 1500.00

[Redacted]

# 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"/> 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)

**McDonald Hopkins LLC PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Tristan Rader**

Mailing Address 14738 Detroit Ave. #141

City  
Lakewood

State  
OH

Zip Code  
44107

Purpose of Disbursement  
P-2024 State House 13 OH

011

Category/  
Type

Candidate Name

Rader, Tristan, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: OH District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	4

FEC Identification Number

C [ ]

Transaction ID : B867461

Amount of Each Disbursement this Period

[ ] 500.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ] [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ] [ ]

Memo Item

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

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

[ ] 500.00 [ ]

[ ] 5250.00 [ ]