

RECEIVED

2014 DEC -8 PM 1:25

Office Use Only MAIL CENTER

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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

12FE4M5

OHIOANS FOR ACCOUNTABLE GOVERNMENT

ADDRESS (number and street) 21887 Lorain Avenue  
P.O. Box 150  
Cleveland OH 44126

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

C C00568550

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 M / D 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 11 / 04 / 2014 in the State of OH

5. Covering Period 10 / 01 / 2014 through 11 / 24 / 2014

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 Peter J Corrigan

Signature of Treasurer Peter J Corrigan

Date 12 / 02 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**OHIOANS FOR ACCOUNTABLE GOVERNMENT**

Report Covering the Period: From:

MM / DD / YYYY  
10 / 01 / 2014

To:

MM / DD / YYYY  
11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="30000.00"/>	<input type="text" value="30000.00"/>
(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="30000.00"/>	<input type="text" value="30000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25000.00"/>	<input type="text" value="25000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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:**

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

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



**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
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 (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 .....	25000.00	25000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	25000.00	25000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25000.00	25000.00

DUPLICATE - UTILITY - WCD-14

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	30000.00	30000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30000.00	30000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

FEDERAL ELECTION COMMISSION

**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 7

<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)  
**OHIOANS FOR ACCOUNTABLE GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Ohio Health Care Association**

Mailing Address 55 Green Meadows drive, South

City Lewis Center State OH Zip Code 43035

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt

MM / DD / YYYY  
10 / 22 / 2014

Transaction ID : SA11AI.4101

Amount of Each Receipt this Period

30000.00

check from association

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

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

30000.00

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

30000.00

**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)						PAGE 7 OF 7				
	<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

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)  
**OHIOANS FOR ACCOUNTABLE GOVERNMENT**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. Targeting Direct Impact</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>/</td> <td>28</td> <td>/</td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10	/	28	/	2014
M M	/	D D	/	Y Y Y Y									
10	/	28	/	2014									
Mailing Address P.O. Box 786		Transaction ID : SB29.4103											
City	State	Zip Code	Amount of Each Disbursement this Period										
Claymont	DE	19703											
Purpose of Disbursement mailer for state candidate		<table border="1"> <tr> <td>004</td> </tr> </table>		004									
004													
Candidate Name		<table border="1"> <tr> <td>25000.00</td> </tr> </table>		25000.00									
25000.00													
OHIOANS FOR ACCOUNTABLE GOVERNMENT		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General												
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼												
<input type="checkbox"/> President													
State:	District:												

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	25000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25000.00

LAWSON | PHILLIPS | WOOD

Schedule package pickup right from your home or office at [usps.com/pickup](http://usps.com/pickup)  
Print postage online - Go to [usps.com/postageonline](http://usps.com/postageonline)

PLEASE PRESS FIRMLY

**PRIORITY<sup>®</sup>**  
**MAIL**

UNITED STATES POSTAL SERVICE

Flat Rate  
Mailing Envelope

For Domestic and International Use

Visit us at [usps.com](http://usps.com)

closed, as long  
contents are  
the adhesive

APPLY:

usps.gov

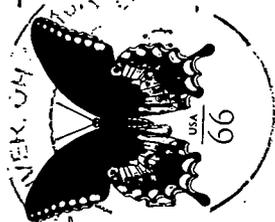
From: /Expéditeur:  
3933 KINGS MILL  
RANCH RIVER, ON L4Y1J6

To: /Destinataire:

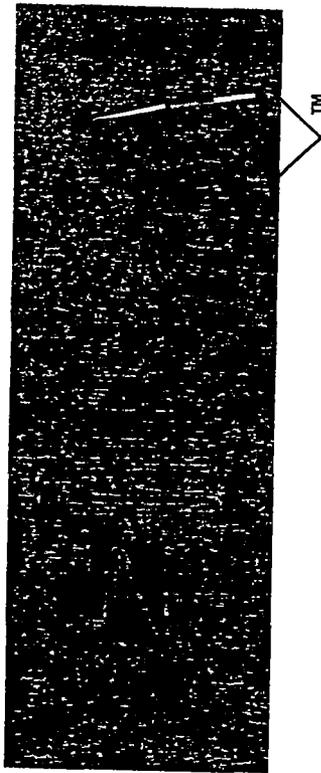
FEDERAL ELECTION COMMISSION  
999 E STREET NW  
WASHINGTON, DC 20463

Country of Destination: /Pays de destination:

USPS packaging products have been awarded Cradle  
to Cradle Certification<sup>SM</sup> for their ecologically-intelligent  
design. For more information go to [mbdc.com/usps](http://mbdc.com/usps)  
Cradle to Cradle Certified<sup>SM</sup> is a certification mark of MBDC.



PLEASE



RECEIVED  
DEC-30 PM 1:20  
REC MAIL CENTER



EPI4F

This packaging is the property of the U.S. Postal Service<sup>®</sup> and is provided solely for use in sending Priority Mail<sup>®</sup> shipments.  
Misuse may be a violation of federal law. This packaging is not for resale. EPI4F © U.S. Postal Service; Oct. 2008; All rights reserved.

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
12/2/14

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JK 12/8/14  
 PREPARER DATE PREPARED

UNION - UNION - UNION