11030202011

RECEIVED

FEC STATEMENT OF ORGANIZATION

2011 APR -8 PM 3: 40 FEC MAIL CENTER

			(See instructions)					Office use only		
1.	NAME OF COMMITTEE (in	full)	(Check if name is changed)		nple: If typying, type the lines	e 121	Ę4M5			
L	Ohio Senate F	und						1111		لــا
							Ш			
ADDRESS (number and street) 228 S. Wsahington Street							Ш			
П	(Check if address	Sujte	115	1.1.1						لــا
L	is changed)	Alex	andria		 	J LY	<u> </u>	22314	ـــا-لــــ	اـــا
				CITY		STAT	EΔ	ZIP (CODE 📥	
СО	MMITTEE'S E-MA	IL ADDRESS (Pleas	e provide only one	e-mail ad	dress)					
П	(Check if address	kdav	is@hdafec.com							
ш	is changed)					لللل				
CO	MMITTEE'S WEB	PAGE ADDRESS (L	JRL)							
	(Check if address is changed)	·		Ш				1111		Щ
		ـــــا		щ.		1111		1-1-1	1.1.1.1	لـــ
2.	DATE 0.4	/ D D / Y	2 0 1 1							
3.										
.	3. FEC IDENTIFICATION NUMBER									
4.	IS THIS STATEM	MENT X NEV	V (N) OR	<u>L</u>	AMENDED (A	A)				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete										
Type or Print Name of Treasurer Keith A. Davis										
Self of Management (Breat (Breat)										
Sig	nature of Treasure	Electronically Fil	ed by / fler ! (//.	Wasis	. Date	0.4	β 9 1	201	1
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS										
_	Office				For further information			EEC E	ODM 4	_
	Use Only				Federal Election Con Toll Free 800-424-95 Local 202-694-1100				ORM 1 02/2009)	

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5.	. TYPE OF COMMITTEE (Check One)						
Candidate Committee:							
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	Name Cand						
	Cand Party	lidate Affiliati	on Office State Senate President District				
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name Cand						
	Party	Comm	nittee:				
	(d)		(National, State (National, State (Democratic, Republican,etc.) Party.				
	Politi	ical Act	tion Committee (PAC):				
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:				
		ليا	Corporation Corporation w/o Capital Stock Labor Organization				
			Mambership Organization Trade Association Cooperative				
			In addition, this committee is a Lobbyist/Registrant PAC.				
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)				
			In addition, this committee is a Lobbyist/Registrant PAC.				
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
	Joint	Fundra	nising Representative:				
	(g)	X	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.				
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
		Com	mittees Participating in Joint Fundraiser				
			Citizens for Josh Mandel 1. FEC ID number C C09494930				
			REPUBLICAN PARTY OF CUYAHOGA COUNTY FEDERAL CAM PAIGN COMMITTEE 2. FEC ID number C C00452482				
			3. FEC ID number C				
			4 FEC ID number C				

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Write or Type Committee Name						
Ohio Senate Fund						
. Name of Any Connected O	ganization, Affiliated Committee, Joint Fundra	using Representative, or Lea	dership PAC Sponsor			
NONE	<u> </u>	<u>. </u>	<u> </u>			
1 1 1 1 1 1 1 1 1	<u> </u>		<u> </u>			
Mailing Address						
	CITY	STATE A	ZIP CODE			
Relationship: Connected Organization	Affiliated Committee Joint Fu	ndraising Representative	Leadership PAC Sponso			
Full Name	228 S. Washington Street Suite 115					
	Alexaudria	VA	22314 _			
Title or Position ♥ Treasurer	CITY A	STATE ▲ Telephone number 703	ZIP CODE & - 549 - 7705			
name and address of any	and address (phone number optional) of t designated agent (e.g., assistant treasurer)		ee; and the			
Mailing Address	228 S. Washington Street	228 S. Washington Street				
	Suite 115					
	Alexandria	VA	22314 _			
Title or Position ♥	CITY A	STATE A	ZIP CODE A			
Treasurer		Telephone number	_ 549 _ 7705			

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Full Name of Designated Agent	Lisa R. Lisker				
Mailing Address	228 S. Washington Street				
	Suite 115	Suite 115			
	Alexandria	VA	22314 –		
Title or Position♥	CITY A	STATE A	ZIP CODE A		
As	sistant Treasurer Tele	ephone number	5497705		
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.					
	BB&T				
Mailing Address	1909 K Street NW				
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	Washington	, DC	20006		
	CITY 🗖	STATE. ⊿	ZIP CODE 🛕		
Name of Bank, De	pository, etc.				
Mailing Address					
	CITY 🔼	STATE ⊿	ZIP CODE A		

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.					
	Date of Receipt				
Hand Delivered	48/11				
USPS First Class Mail	Postmarked				
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Delivery Confirmation™ or Signature Confirmation™ Label					
USPS Express Mail	Postmarked				
Postmark Illegible					
No Postmark					
Overnight Delivery Service (Specify):	Shipping Date				
Nex	t Business Day Delivery				
Received from House Records & Registration Of	Date of Receipt ffice				
Received from Senate Public Records Office	Date of Receipt				
Received from Electronic Filing Office	Date of Receipt				
Other (Specify):	Date of Receipt or Postmarked				
l	4/11/11				
PREPARER (2/2005)	DATE PREPARED				
(3/2005)					