REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Committee-Ohio
Savings Associations' League Political Action

ADDRESS (number and street) [X] Check if different than previously reported
88 East Broad Street, Suite 1850

CITY, STATE and ZIP CODE
Columbus, OH 43215

FEDERAL ELECTION COMMISSION
JUL 30 9 20 AM '95

2. FEC IDENTIFICATION NUMBER
C00004010

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report
[ ] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[ ] January 31 Year End Report
[X] July 31 Mid Year Report (Non-election Year Only)
[ ] Termination Report

Monthly Report Due On:
[ ] February 20 [ ] June 20 [ ] October 20
[ ] March 20 [ ] July 20 [ ] November 20
[ ] April 20 [ ] August 20 [ ] December 20
[ ] May 20 [ ] September 20 [ ] January 31

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [ ] YES [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 1-1-95 through 6-30-95		
6. (a) Cash on Hand January 1, 19 95		$ 12,056.52
(b) Cash on Hand at Beginning of Reporting Period	$ 12,056.52	
(c) Total Receipts (from Line 19)	$ 7,569.29	$ 7,569.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 19,625.81	$ 19,625.81
7. Total Disbursements (from Line 30)	$ 5,642.49	$ 5,642.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 13,983.32	$ 13,983.32
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Robert K. Schmitz, Deputy Treasurer

Signature of Treasurer
Robert K. Schmitz

Date 7/27/95

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

FEC FORM 3X
(revised 9/93)

FE4ANI01

95039849546

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE Committee-Ohio Savings Associations' League Political Action

REPORT COVERING PERIOD FROM 1-1-95 TO: 6-30-95

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	3,450.00	3,450.00	11(a)(i)
ii. Unitemized	3,895.00	3,895.00	11(a)(ii)
iii. Total (add i and ii) ➤	7,345.00	7,345.00	11(a)(iii)
b. Political Party Committees	-0-	-0-	11(b)
c. Other Political Committees (such as PACs)	-0-	-0-	11(c)
d. Total Contributions (add a iii, b and c) ➤	7,345.00	7,345.00	11(d)
12. Transfers From Affiliated/Other Party Committees	-0-	-0-	12
13. All Loans Received	-0-	-0-	13
14. Loan Repayments Received	-0-	-0-	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-	16
17. Other Federal Receipts (Dividends, Interest, etc.)	224.29	224.29	17
18. Transfers from Nonfederal Account for Joint Activity	-0-	-0-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	7,569.29	7,569.29	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	7,569.29	7,569.29	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	317.49	317.49	21(a)(i)
ii. Non-Federal Share	-0-	-0-	21(a)(ii)
b. Other Federal Operating Expenditures	-0-	-0-	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	317.49	317.49	21(c)
22. Transfers to Affiliated/Other Party Committees	-0-	-0-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	1,000.00	23
24. Independent Expenditures (use Schedule E)	-0-	-0-	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-	25
26. Loan Repayments Made	-0-	-0-	26
27. Loans Made	-0-	-0-	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	-0-	-0-	28(a)
b. Political Party Committees	-0-	-0-	28(b)
c. Other Political Committees (such as PACs)	-0-	-0-	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	-0-	-0-	28(d)
29. Other Disbursements	4,325.00	4,325.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	5,642.49	5,642.49	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	5,642.49	5,642.49	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	7,345.00	7,345.00	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	7,345.00	7,345.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	317.49	317.49	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	317.49	317.49	37

FE4AN101

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)
Savings Associations' League Political Action Committee-Ohio

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Charles Valentine 10569 Ridgewater Drive Painesville, OH 44077 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Security Federal Savings and Loan Association Mayfield Hts., OH 44124 Occupation: Officer Aggregate Year-to-Date > $	3/7/95	$300.00
Robert Brosky 707 North Woodhill Drive Amherst, OH 44001 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	First Federal Savings and Loan Association Occupation: Officer Aggregate Year-to-Date > $	3/31/95	$300.00
Dennis Betz 917 Braemore Lane Cincinnati, OH 45233 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Centennial Savings Bank 1051 Tahoe Terrace Cincinnati, OH 45238 Occupation: Officer Aggregate Year-to-Date > $	3/7/95	$300.00
Donald Shackelford 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	State Savings Bank Columbus, OH 43215 Occupation: Officer Aggregate Year-to-Date > $	3/31/95	$250.00
Larry Caldwell 10491 Rock Hill Road Cambridge, OH 43725 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Cambridge Savings Bank Cambridge, OH 43725 Occupation: Officer Aggregate Year-to-Date > $	3/7/95	$300.00
Douglas M. McKay 227 Griswold Drive Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Home Savings & Loan Co. Youngstown, OH 44501 Occupation: Officer Aggregate Year-to-Date > $	6/26/95	$ 500.00
Donald B. McKay 7680 South Avenue Ext. Youngstown, OH 44512 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Home Savings & Loan Co. Youngstown, OH 44501 Occupation: Officer Aggregate Year-to-Date > $	6/26/95	$ 500.00

SUBTOTAL of Receipts This Page (optional) $2,450.00

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

9 5 0 3 9 3 8 4 9 7 8

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John H. Holt 590 N. Main Street Poland, OH 44514 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Home Savings & Loan Co. Youngstown, OH 44501 Occupation: Officer Aggregate Year-to-Date > $	6/26/95	$ 500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Donald J. Varner 249 Griswold Drive Youngstown, OH 44512 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Home Savings & Loan Co. Youngstown, OH 44501 Occupation: Officer Aggregate Year-to-Date > $	6/26/95	$ 500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) $1,000.00

TOTAL This Period (last page this line number only) $3,450.00

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Savings Associations' League Political Action Committee-Ohio

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 15.83	1/5/95	$ 15.83
B. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 37.23	1/10/95	$ 21.40
C. State SAvings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 51.27	2/5/95	$ 14.04
D. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 73.40	2/10/95	$ 22.13
E. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 86.15	3/5/95	$ 12.75
F. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 109.87	3/10/95	$ 23.72
G. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 123.27	4/5/95	$ 13.40

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

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Savings Associations' League Political Action Committee-Ohio

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 150.24	4/10/95	$ 26.97
B. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 161.43	5/5/95	$ 11.19
C. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 187.65	5/10/95	$ 26.22
D. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 197.14	6/5/95	$ 9.49
E. State Savings Bank 20 E. Broad Street Columbus, OH 43215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Earned Occupation Aggregate Year-to-Date $ 224.29	6/10/95	$ 27.15
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	$ 224.29

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Cincinnati, OH	Income Tax Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3-3-95	$317.49
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$317.49

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cremeans for Congress Committee P.O. Box 632 Gallipolis, OH 45631	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	4/14/95	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$1,000.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cupp for Senate Committee 2021 Allentown Road, Suite 3 Lima, OH 45805	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/7/95	$ 500.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Citizens for Nancy Chiles Dix 10 W. Locust Street Newark, OH 43055	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/6/95	$ 500.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Finan for State Senate Committee 11137 Main Street Cincinnati, OH 45241	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/9/95	$ 500.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Pat Tiberi 865 Macon Alley Columbus, OH 43206	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/22/95	$ 200.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Mason for State Representative Committee 50 W. Broad Street Columbus, OH 43215	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	4/4/95	$ 200.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Jim Buchy for State Representative 301 E. Main Street Greenville, OH 45331	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	4/18/95	$ 200.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Committee to Elect Jon Myers 1120 Gender Road Lancaster, OH 43130	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	4/25/95	$ 300.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Scot Nein P.O. Box 414 Middletown, OH 45044	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	4/26/95	$ 150.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Doug White for Good Government Comm. 19359 SR 135 Winchester, OH 45697	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	4/26/95	$ 150.00

SUBTOTAL of Disbursements This Page (optional) $2,700.00

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

95039849 64

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Senator Robert Burch Committee 123 W. High Avenue New Philadelphia, OH 44663	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/22/95	$ 125.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Oluan Committee 2847 Emmick Drive Toledo, OH 43605	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/22/95	$ 125.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Jim Jordan 6654 West Kanagy Road West Liberty, OH 43357	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/22/95	$ 100.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Committee for E. J. Thomas 865 Macon Alley Columbus, OH 43206	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/22/95	$ 200.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Netzley & Fair Taxes 2750 Pemberton Road Laura, OH 45337	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/2//95	$ 150.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Richard Hodges 24034-L Fayette, OH 43521	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/22/95	$ 100.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Hottinger 310 McMillen Drive Newark, OH 43055	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/22/95	$ 125.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional) $925.00

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

95039384945

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Republican Senate Campaign Committee P.O. Box 15623 Columbus, OH 43215	Contribution	2/28/95	$ 500.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Republican Senate Campaign Committee P.O. Box 15623 Columbus, OH 43215	Contribution	5/22/95	$ 500.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Ohio House Republican Campaign Committee 35 E. Gay Street, Suite 404 Columbus, OH 43215	Contribution	6/12/95	$ 500.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: ☐ Primary ☐ General ☐ Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**

SUBTOTAL of Disbursements This Page (optional) $1,500.00

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

9503984946

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

Savings Associations' League Political Action Committee-Ohio

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Elect Diane V. Grendell Committee 7413 Tattersall Drive Chesterland, OH 44026	Lost Check dated 10-20-94 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6-30-95	($200.00)
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Jacobson for State Representative Committee 220 Brookwood Drive Englewood, OH 45322	Lost Check dated 10-20-94 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6-30-95	($200.00)
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Citizens for Schuring 800 Woodview N.E. Massillon, OH 44646	Lost Check dated 10-20-94 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6-30-95	($200.00)
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Committee to Re-elect Troy Lee James 4120 Cedar Avenue Cleveland, OH 44103	Lost Check dated 10-20-95 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6-30-95	($200.00)
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional) ..... ($800.00)

TOTAL This Period (last page this line number only) $4,325.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 7-27-95
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

[illegible]

PREPARER

7-30-95

DATE PREPARED

FEC FORM 70-2 (12/92)

9 5 0 3 9 0 8 4 9 4 8