

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

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

Wulsin for Congress

ADDRESS (number and street)  
▼

1080 Nimitzview Dr.

☐Check if different  
than previously  
reported. (ACC)

Suite 400

Cincinnati

OH

45230

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00411777

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

OH

02

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)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2008

through

06

30

2008

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

Anne Zimmerman

Signature of Treasurer

Electronically Filed by Anne Zimmerman

Date

12

04

2008

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 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Wulsin for Congress

Report Covering the Period:

From:

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

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	310242.74	1090411.78
(b) Total Contribution Refunds (from Line 20(d)).....	700.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	309542.74	1088911.78
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	144685.55	737153.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	68.00	174.32
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	144617.55	736979.07
8. Cash on Hand at Close of Reporting Period (from Line 27).....	378084.60	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name  
Wulsin for Congress

Report Covering the Period:

From:

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

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

189748.30

799746.40

(ii) Unitemized.....

43785.27

136817.31

(iii) TOTAL of contributions  
from individuals..... ▶

233533.57

936563.71

(b) Political Party Committees.....

3500.00

3500.00

(c) Other Political Committees  
(such as PACS).....

73204.17

149434.07

(d) The Candidate.....

5.00

914.00

(e) TOTAL CONTRIBUTIONS  
(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))

310242.74

1090411.78

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

## 13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS  
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

68.00

174.32

15. OTHER RECEIPTS  
(Dividends, Interest, etc.).....

749.37

2745.08

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

311060.11

1093331.18

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

## II. DISBURSEMENTS

### COLUMN A Total This Period

### COLUMN B Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	144685.55	737153.39
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	39000.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	39000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	700.00	1250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	700.00	1500.00
21. OTHER DISBURSEMENTS.....	0.00	1050.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	145385.55	778703.39

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	212410.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	311060.11
25. SUBTOTAL (add Line 23 and Line 24).....	523470.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	145385.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	378084.60

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

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

FOR LINE NUMBER: PAGE 5 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Michael Abernathy

Mailing Address 431 Ohio Pike

City

Cincinnati

State

OH

Zip Code

45255-3375

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michael and Co. Salon

Occupation

Designer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5048159

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Darlene A Abt

Mailing Address 190 Ventana Sierra Dr

City

Grass Valley

State

CA

Zip Code

95945-9743

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AJA Video Systems Inc

Occupation

Administrator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050247

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Richard H Allen

Mailing Address 3822 Barker Road

City

Cincinnati

State

OH

Zip Code

45229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: C5028099

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 6 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Kevin Allred

Mailing Address 1056 Carrara Place

City

Los Angeles

State

CA

Zip Code

90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Munger, Tolles & Olson

Occupation

lawyer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050517

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Alan P Altman

Mailing Address 492 Vista Ridge Dr

City

South Lebanon

State

OH

Zip Code

45065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Associates in OBGYN

Occupation

OGBYN

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 8

Transaction ID: C4991506

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

David Altman

Mailing Address 3550 Raymar Blvd.

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALTMAN LAW OFFICE

Occupation

ATTORNEY

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

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

Transaction ID: C4987933

Amount of Each Receipt this Period

1200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1700.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Samuel Mather Anderson

Mailing Address 164 Leonia Avenue

City

Leonia

State

NJ

Zip Code

07605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Samuel Anderson Architects

Occupation  
Architect

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: C5030058

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

James J Anthony

Mailing Address 10550 Montgomery Rd Suite 33

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Riverhills Healthcare

Occupation  
Neurologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C4933822

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

James J Anthony

Mailing Address 10550 Montgomery Rd Suite 33

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Riverhills Healthcare

Occupation  
Neurologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050344

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1800.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Armin Aren

Mailing Address 8066 Lancelot Dr

City

Cincinnati

State

OH

Zip Code

45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: C4992981

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Christine M. Augustyniak

Mailing Address 1730 Lamont St. N.W.

City

Washington

State

DC

Zip Code

20460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Environmental Protection  
Agency

Occupation  
Economist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5050928

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Barbara Baetz-Greenwalt, MD

Mailing Address 3145 N Park Blvd

City

Cleveland Hts

State

OH

Zip Code

44118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACGME

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: C5025164

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1400.00

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

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

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

FOR LINE NUMBER: PAGE 9 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

THOMAS A BALDWIN

Mailing Address 5085 BOUCHAINE WAY

City

CINCINNATI

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

ATTORNEY

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5050862

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

William James Ball, Jr.

Mailing Address 1112 Crooked Creek Ln

City

New Richmond

State

OH

Zip Code

45157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Cincinnati

Occupation

researcher/educator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051378

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Philip G. Barber

Mailing Address 125 E 72 st

City

new york

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Paul Weiss Rifkind

Occupation

attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004880

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Hathaway Barry

Mailing Address PO Box 157

City

Pt. Reyes

State

CA

Zip Code

94956

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Mediator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 8 / 2 0 0 8

Transaction ID: C5020013

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ronald C. Barusch

Mailing Address 1440 New York Ave., NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Skadden, Arps, Slate, Mea-  
gher and Flom

Occupation

Partner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041014

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Rebecca Bascom Bascom

Mailing Address 850 Appenzell Dr.

City

Hummelstown

State

PA

Zip Code

17036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hershey Medical Center

Occupation

Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Transaction ID: C4989812

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3050.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Christian Bastian

Mailing Address 38 Sidney Place

City

Brooklyn

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metropolitan Transportati-  
on Authority

Occupation

Transportation Planner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 8

Transaction ID: C4990468

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ronald T Bates

Mailing Address 1859 Keys Crescent Lane

City

Cincinnati

State

OH

Zip Code

45206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Legg Mason Investments

Occupation

Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029513

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John M Beardsley

Mailing Address 6419 Ridge Drive

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harvard University

Occupation

Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050042

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1450.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Douglas J Bell

Mailing Address 6061 Bayberry Dr

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kroger

Occupation

Project Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 8

Transaction ID: C4990502

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Helen A. Benjamin

Mailing Address 2401 Ingleside Ave. 2-C

City

Cincinnati

State

OH

Zip Code

45206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043471

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ellen A Berghamer

Mailing Address 3580 Shaw Ave.Apt. 212

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: C5020554

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

George A Berman

Mailing Address 22 Ravine Rd

City

Winchester

State

MA

Zip Code

01890-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Peabody & Arnold

Occupation  
attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051303

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Bruce Bernard, M.D.

Mailing Address 347 Wood Ave

City

Cincinnati

State

OH

Zip Code

45220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NIOSH

Occupation  
physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043577

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Susan D Bernstein

Mailing Address 3681 Mohler Road

City

Cincinnati

State

OH

Zip Code

45241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Dentist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

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

Transaction ID: C4956775

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Michael C. Berry

Mailing Address 3727 Middlebrook Avenue

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 6 / 2 0 0 8

Transaction ID: C4990896

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Michael C. Berry

Mailing Address 3727 Middlebrook Avenue

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050249

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Sean Bertram

Mailing Address 2053 Quartz Cliff St  
Unit 202

City

Las Vegas

State

NV

Zip Code

89117-6007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Culinary Training Academy

Occupation

Director of Administration

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 8

Transaction ID: C5012608

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Eula Bingham-Mattheis

Mailing Address 3547 Herschel View Street

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
university cincinnati

Occupation  
retired?

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: C5029832

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John T Bird

Mailing Address 200 W. 13th  
P.O. Box 727

City

Hays

State

KS

Zip Code

67601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051972

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

walter blair

Mailing Address 3494 Forestoak Ct

City

cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
urban consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043727

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1300.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dorothy Anne Blatt

Mailing Address 1201 Edgecliff Pl. #1411

City

Cincinnati

State

OH

Zip Code

45206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation

retired - Former Mental Health Service

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 8

Transaction ID: C5012193

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Lucas Blocher

Mailing Address 2929 Annwood St

City

Cincinnati

State

OH

Zip Code

45206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 7 / 2 0 0 8

Transaction ID: C5019945

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Peter Block

Mailing Address 4 Filson Place

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

author consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041952

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 17 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Frank H Bloom

Mailing Address 12 Woodcreek Dr

City

Cincinnati

State

OH

Zip Code

45241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5048082

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Barbara W Boat

Mailing Address 10 Little Creek Lane

City

Cincinnati

State

OH

Zip Code

45246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Childrens Hospital

Occupation

Psychologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052219

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

david C boch

Mailing Address 44 Montague street

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bingham McCutchen

Occupation

Lawyer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: C5020610

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Steven R. Bohlen

Mailing Address 1157 Fieldview Drive

City

Reston

State

VA

Zip Code

20194

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consortium for Ocean Lead-  
ership

Occupation

President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4990449

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Roger E. Bohn

Mailing Address 3631 Syracuse Avenue

City

San Diego

State

CA

Zip Code

92122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCSD

Occupation

Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

601.02

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043558

Amount of Each Receipt this Period

501.02

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Kathryn Infield Boniface

Mailing Address 1011 Lenox Place

City

Cincinnati

State

OH

Zip Code

45229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: C4999893

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1251.02

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Keith J Bookbinder

Mailing Address 5799 Fairway Dr

City

Mason

State

OH

Zip Code

45040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial Planner

Occupation

Harbour Financial Group

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	6	/	2	0	0	8

Transaction ID: C5027476

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Phyllis G. Bossin

Mailing Address 201 Worthington Ave.

City

Cincinnati

State

OH

Zip Code

45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phyllis G. Bossin Co., LPA

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	0	8

Transaction ID: C5050126

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Charles R. Boswell

Mailing Address 9629 Carriage Run Circle

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N.A.

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	2	/	2	0	0	8

Transaction ID: C5013105

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Karl Bouldin

Mailing Address 549 Mayellen Ave

City

San Jose

State

CA

Zip Code

95126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stanford Linear Accelerat-  
or Center

Occupation

Electronics associate

Receipt For: 2008

Election Cycle-to-Date ▼

☐ Primary ☒ General  
☐ Other (specify) ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5026565

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

James T Boulger

Mailing Address 2 West 4th Street

City

Chillicothe

State

OH

Zip Code

45601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Attorney

Receipt For: 2008

Election Cycle-to-Date ▼

☐ Primary ☒ General  
☐ Other (specify) ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5048483

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Rex Lynn Boutelle

Mailing Address 2613 Oldforge Lane

City

Cincinnati

State

OH

Zip Code

45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DHL Express

Occupation

Transportation Planner

Receipt For: 2008

Election Cycle-to-Date ▼

☐ Primary ☒ General  
☐ Other (specify) ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052436

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Julia M. Boysen

Mailing Address 9 Cornelia Drive

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 8

Transaction ID: C4960177

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Howard A Brecher, Esq.

Mailing Address 444 East 84th St.

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bernhard & Co.

Occupation

Lawyer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: C4999783

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Charlotte Brooks

Mailing Address 2566 Villa Lane

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 6 / 2 0 0 8

Transaction ID: C4990907

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Peter Brooks

Mailing Address 675 Peter Jefferson Pkwy  
Ste 160

City State Zip Code  
Charlottesville VA 22911-8618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CornerStone Partners LLC

Occupation  
Investment management

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5047958

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Jennifer L. Brosen

Mailing Address 8 Elm Rock Rd.

City State Zip Code  
Bronxville NY 10708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
none

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5027326

Amount of Each Receipt this Period

1300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Christopher M. Bruner

Mailing Address 616 Wellesley Dr

City State Zip Code  
Claremont CA 91711-3427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
consultant

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 8

Transaction ID: C5012571

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2300.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

James A Bryant

Mailing Address 1216 N. Heincke Rd.

City

Miamisburg

State

OH

Zip Code

45342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ODH

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: C5030091

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Jerry C Bryant, Jr.

Mailing Address 1581 Sudbury Lane  
Apt F

City

Fairborn

State

OH

Zip Code

45324

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSC

Occupation  
Programmer/Analyst

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C4944694

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Sarah Burton

Mailing Address 1002 Parkside Dr.

City

Lakewood

State

OH

Zip Code

44107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fosbel

Occupation  
EVP/CFO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041971

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1250.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Robert C Buxbaum, M.D.

Mailing Address 202 Bellevue Street

City

Newton

State

MA

Zip Code

02458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HVMA

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029539

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Anne M. Byars

Mailing Address 2103 Schulle Avenue

City

Austin

State

TX

Zip Code

78703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
farmer/ homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: C5014979

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ellen K. Campbell

Mailing Address 6610 Lyceum Ct.

City

Cincinnati

State

OH

Zip Code

45230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
not employed

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5027473

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mary Campbell

Mailing Address 1602 Locust St.

City

State

Zip Code

Point Pleasant

OH

45153

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

None

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043730

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Paul L. Campbell

Mailing Address 1602 Locust St.

City

State

Zip Code

Point Pleasant

OH

45153

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

None

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5050123

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Steven J Carlip

Mailing Address 310 A Street

City

State

Zip Code

Davis

CA

95616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of California  
at Davis

Occupation

professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051837

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1300.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Thomas W Castele

Mailing Address 447 Fort Washington Avenue  
Apt. 54

City State Zip Code  
New York NY 10033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Canfield, Madden & Ruggie-  
ro, LLP

Occupation  
Personal assistant

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 2 / 2 0 0 8

Transaction ID: C4992552

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Albert Alan Chambers

Mailing Address 3499 Windisch Ave.

City State Zip Code  
Cincinnati OH 45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Radiology Asso-  
ciates

Occupation  
Neuroradiologist

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: C5005973

Amount of Each Receipt this Period

1600.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Cynthia Chavez

Mailing Address 2012 Edgecliff Point

City State Zip Code  
Cincinnati OH 45206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043742

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4150.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Manuel Chavez II

Mailing Address 2012 Edgecliff Pt

City

Cincinnati

State

OH

Zip Code

45206-2858

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Business owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043743

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Wendy Chavkin, MD, MPH

Mailing Address 116 Pinehurst Ave

City

New York

State

NY

Zip Code

10033-1755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
columbia university

Occupation

physician professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: C4988646

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Wendy Chavkin, MD, MPH

Mailing Address 116 Pinehurst Ave

City

New York

State

NY

Zip Code

10033-1755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
columbia university

Occupation

physician professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041310

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2650.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Constance Christopher

Mailing Address 23 East 10th Street

City

New York

State

NY

Zip Code

10003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self-employed

Occupation

writer, reviewer, editor

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: C4991284

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John Francis Clement

Mailing Address 319 Rutgers Ct.

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5044265

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John Francis Clement

Mailing Address 319 Rutgers Ct.

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050236

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Brian Cohen

Mailing Address 40 Winsor Road

City

Sudbury

State

MA

Zip Code

01776

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tufts New England Medical  
Center

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5049569

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

David J Cohen

Mailing Address 3209 Broad Branch Terrace NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dept for Professional Emp-  
loyees, AFL-C

Occupation

Executive Director

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C4956772

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

David J Cohen

Mailing Address 7108 Thomas Drive

City

Madeira

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Convergys

Occupation

Software Engineer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029556

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

500.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Harvey J. Cohen

Mailing Address 5225 Autumnwood Drive

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dinsmore & Shohl

Occupation  
attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 9 / 2 0 0 8

Transaction ID: C4992194

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Kent N. Collier

Mailing Address 3394 Hollister Rd.

City

Cleveland Hts.

State

OH

Zip Code

44118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
musician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: C5029895

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Marshal Compton

Mailing Address 4980 Miami Road

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Russell Compton Architects

Occupation  
Architect

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050543

Amount of Each Receipt this Period

2240.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2590.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Michael D Connelly

Mailing Address 1242 Edwards Rd

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic Healthcare Partners

Occupation

President &amp; Chief Executive Officer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	9	/	2	0	0	8

Transaction ID: C5030019

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Michael J. Cooke

Mailing Address 5955 Drake Rd.

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CFAC

Occupation

Podiatrist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	0	8

Transaction ID: C5048519

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

David Lynn Copeland

Mailing Address 24 Edmondson Ave

City

Lexington

State

VA

Zip Code

24450

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Virginia Military Institute

Occupation

doctor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	0	8

Transaction ID: C5048572

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dennis P. Corbett

Mailing Address 3611 Shepherd Street

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Leventhal Senter & Lerman  
PLLC

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4989700

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Georgia M Court

Mailing Address 400 Pike St. #904

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

College Instructor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029024

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Patricia F Cowherd

Mailing Address 808 Asbury Road

City

Cincinnati

State

OH

Zip Code

45255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: C5000535

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Cathy T. Crain

Mailing Address 900 Adams Crossing  
Ste 13200

City State Zip Code  
Cincinnati OH 45202-1681

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052386

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Maryke C. Cramerus

Mailing Address 2026 Banks St.

City State Zip Code  
Houston TX 77098

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
psychotherapist

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 8

Transaction ID: C4990217

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Sarah Crichton

Mailing Address 201 Bergen St

City State Zip Code  
Brooklyn NY 11217-2210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farrar Straus and Giroux

Occupation  
Book Publisher

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: C5030008

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Katharine I. Crost

Mailing Address 333 Central Park West  
Apt. 41

City State Zip Code  
New York NY 10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Orrick, Herrington & Sutcliffe LLP

Occupation  
attorney

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C4933573

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Susan Croushore

Mailing Address 1430 Shoreline Way

City State Zip Code  
Loveland OH 45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Christ Hospital

Occupation  
Administrator

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5050917

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Andrew Crowley

Mailing Address 140 Magnolia Ave.

City State Zip Code  
Glendale OH 45246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Landlord

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5044268

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Jane D Crowley

Mailing Address 140 Magnolia Ave

City

Glendale

State

OH

Zip Code

45246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic Healthcare Partners

Occupation

Healthcare executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051103

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Jane D Crowley

Mailing Address 140 Magnolia Ave

City

Glendale

State

OH

Zip Code

45246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic Healthcare Partners

Occupation

Healthcare executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052414

Amount of Each Receipt this Period

1300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ian M Cumming

Mailing Address 165 Huckleberry Dr

City

Jackson

State

WY

Zip Code

83001-9394

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Leucadia National

Occupation

Chairman

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID: C4944051

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3300.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Peter Curtin

Mailing Address 2625 Ellentown Road

City

La Jolla

State

CA

Zip Code

92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCSD

Occupation

Physician/Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029603

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Paul Cwikla

Mailing Address 1823 Kinneys Lane

City

Portsmouth

State

OH

Zip Code

45662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Podiatrist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 8

Transaction ID: C4999480

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Steven Richard Daggitt

Mailing Address 7811 Dee Street

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Siemens

Occupation

IT consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: C4949149

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1350.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Steven Richard Daggitt

Mailing Address 7811 Dee Street

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Siemens

Occupation

IT consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 8

Transaction ID: C4999432

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Steven Richard Daggitt

Mailing Address 7811 Dee Street

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Siemens

Occupation

IT consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: C5027535

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Marilyn H Dainoff

Mailing Address 8606 Empire Ct

City

Cincinnati

State

OH

Zip Code

45231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

ergonomist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: C5015140

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

John D Daley

Mailing Address 1325 18th Street, NW  
Apt. 601

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Department of State

Occupation  
Attorney

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5042890

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Edward K Damon

Mailing Address 431 Crows Nest Ln

City State Zip Code  
Sequim WA 98382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043546

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

emil (nmi) dansker, phd

Mailing Address 1319 stonemill ct.

City State Zip Code  
cincinnati OH 45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
390.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029105

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

525.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

emil (nmi) dansker, phd

Mailing Address 1319 stonemill ct.

City

cincinnati

State

OH

Zip Code

45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050403

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Judith DaPolito

Mailing Address 620 Yeoman Court

City

West Carrollton

State

OH

Zip Code

45449

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
not employed

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5134837

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

James H. Davidson

Mailing Address 555 - 12th St. N.W., Ste. 710

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
Davidson & Co.

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4990849

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Karina W Davidson

Mailing Address 541 W 113th St Apt 2F

City

New York

State

NY

Zip Code

10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbia University

Occupation  
Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 8

Transaction ID: C4992360

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Thomas J Davis

Mailing Address 3461 Washington St.

City

San Francisco

State

CA

Zip Code

94118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
wells fargo bank

Occupation  
banker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

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

Transaction ID: C4956610

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Nancy R. Dawley

Mailing Address 7497 Hosbrook Rd.

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: C4959478

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2600.00

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

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

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

FOR LINE NUMBER: PAGE 41 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Nancy R. Dawley

Mailing Address 7497 Hosbrook Rd.

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 8

Transaction ID: C5005374

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Nancy R. Dawley

Mailing Address 7497 Hosbrook Rd.

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5042065

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

William Decenso

Mailing Address 5078 Buchaine Way

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Santen & Hughes

Occupation  
attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050568

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

350.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Jay L. Degen

Mailing Address 6746 Fieldhouse Way

City

Cincinnati

State

OH

Zip Code

45227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cincinnati Childrens Hosp-  
ital

Occupation

Professor of Pediatrics

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	7	/	2	0	0	8

Transaction ID: C5028304

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Asimina K. Demakes

Mailing Address 26 Rolling Hills Dr

City

Cincinnati

State

OH

Zip Code

45215-1353

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

580.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	2	/	2	0	0	8

Transaction ID: C5026505

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Asimina K. Demakes

Mailing Address 26 Rolling Hills Dr

City

Cincinnati

State

OH

Zip Code

45215-1353

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

580.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: C5043682

Amount of Each Receipt this Period

80.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1080.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

James R Devaney

Mailing Address 6500 Kincaid Lane

City

Cincinnati

State

OH

Zip Code

45213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McCormick Equipment Co.,  
Inc.

Occupation

Manager, Info Systems

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052263

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Harry Dodson

Mailing Address 56 South Street

City

Ashfield

State

MA

Zip Code

01330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dodson Associates, Ltd.

Occupation

Landscape Architect

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051964

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Catherine M Dunlap

Mailing Address 220 W Calle Montana Jack

City

Green Valley

State

AZ

Zip Code

85614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NA

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: C5022723

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Lester S. Duplechan

Mailing Address 8200 Miami Road

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Beacon Orthopaedics and  
Sports Medicine

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 8

Transaction ID: C4960155

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Richard Robert Ellison

Mailing Address 726 White Tail Ridge Dr

City

Fairlawn

State

OH

Zip Code

44333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Summit Ophthalmology

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052019

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John A Emory

Mailing Address 7410 Spencer Ct

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BAE SYSTEMS

Occupation  
engineer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C4931092

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1150.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

John A Emory

Mailing Address 7410 Spencer Ct

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BAE SYSTEMS

Occupation  
engineer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050191

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Matthew E Epstein

Mailing Address 18 Annawan Road

City

Waban

State

MA

Zip Code

02468

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Goulston & Storrs

Occupation  
attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: C5028029

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John D. Erhardt

Mailing Address 8248 Sunfish Lane

City

Maineville

State

OH

Zip Code

45039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5027470

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Jerome L. Ernst

Mailing Address 3028 Kinmont Ave

City

Cincinnati

State

OH

Zip Code

45208-2958

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jerry Ernst Auto Body

Occupation

President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5027480

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Carla K. Fee

Mailing Address 9794 Woolard Ln.

City

Hillsboro

State

OH

Zip Code

45133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5050122

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Richard G. Fendl

Mailing Address 6763 Rollymeade Dr.

City

Madeira

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: C5030588

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1250.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

David Firestone

Mailing Address 54 Hilltop Road

City

Chestnut Hill

State

MA

Zip Code

02467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Firestone & Parson Inc.

Occupation

Merchant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 8

Transaction ID: C5005285

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Linda J Fischer

Mailing Address 9000 Spooky Ridge Lane

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AEC

Occupation

Merchandiser

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 7 / 2 0 0 8

Transaction ID: C5005553

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Charles Fleischmann, III

Mailing Address 9575 Cunningham Rd.

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: C4938137

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2600.00

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

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

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

FOR LINE NUMBER: PAGE 48 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Peter Flom

Mailing Address 515 West End Ave

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BrainScope

Occupation  
Statistician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004867

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John P. Foley, III

Mailing Address 2401 Ingleside Ave

City

Cincinnati

State

OH

Zip Code

45206-4400

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Ohio

Occupation  
Lawyer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5049880

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Bernard B. Foster

Mailing Address 533 Windings Ct.

City

Cincinnati

State

OH

Zip Code

45220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cincinnati Center for Psy-  
choanalysis

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052297

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 49 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Vidrik T. Frankfather

Mailing Address 410 2nd St #2

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hudson Castle Group

Occupation

VP

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004861

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

William A Friedlander

Mailing Address 440 Whitman Ct

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bartlett & Co

Occupation

Financial Advisor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5026203

Amount of Each Receipt this Period

1600.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Michael Friedman

Mailing Address 8600 Sleepy Hollow Drive

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kalypso

Occupation

Owner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050254

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2100.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Carol Friel

Mailing Address 650 Windings Lane

City

Cincinnati

State

OH

Zip Code

45220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: C5026332

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Kenneth Frisof

Mailing Address 15701 Fernway Road

City

Shaker Heights

State

OH

Zip Code

44120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MetroHealth

Occupation  
Family Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051505

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Patricia Rossner Fry

Mailing Address 8800 Indian Hill

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Park city ski resort

Occupation  
ski instructor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5026495

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Elton T Fukumoto

Mailing Address 770 James St # 412

City

Syracuse

State

NY

Zip Code

13203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SYRACUSE UNIVERSITY COLLEGE OF LAW

Occupation

Legal Writing Prof

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: C4988565

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Eleonora Fusco

Mailing Address 529 Tusculum Ave

City

Cincinnati

State

OH

Zip Code

45226-1773

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050034

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

E. Marianne Gabel

Mailing Address 49 Forest Ave.

City

Delaware

State

OH

Zip Code

43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: C5030011

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Matthew A. Gabel

Mailing Address 1018 Sunnyside Road

City

Oakland

State

CA

Zip Code

94610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bank of America, N.A.

Occupation

Risk Mgmt. Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: C5020038

Amount of Each Receipt this Period

125.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Anthony W. Gambino

Mailing Address 5130 Wissioming Rd

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: C5019884

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Gertrud A Gambino

Mailing Address 440 Lafayette Ave

City

Cincinnati

State

OH

Zip Code

45220-1022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5026548

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4725.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

James F Gamill, Jr.

Mailing Address 19 Dorset Rd

City

Belmont

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gamalytics LLC

Occupation  
Principal

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043464

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Alphonse A. Gerhardtstein

Mailing Address 5815 Wyatt

City

Cincinnati

State

OH

Zip Code

45213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gerhardtstein & Branch

Occupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053501

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Sarah K Gideonse

Mailing Address 2570 Madison Rd., #20

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 8

Transaction ID: C4959928

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Sarah K Gideonse

Mailing Address 2570 Madison Rd., #20

City State Zip Code  
 Cincinnati OH 45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 5 / 2 0 0 8

Transaction ID: C5005424

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Sarah K Gideonse

Mailing Address 2570 Madison Rd., #20

City State Zip Code  
 Cincinnati OH 45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 5 / 2 0 0 8

Transaction ID: C5042899

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Nancy L. Gilman

Mailing Address 5665 Drake Rd.

City State Zip Code  
 Cincinnati OH 45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 0 / 2 0 0 8

Transaction ID: C5043405

Amount of Each Receipt this Period

1200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1300.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Robert G. Glaser, Ph.D.

Mailing Address 8259 Windsail Ct.

City

Maineville

State

OH

Zip Code

45039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Audiologist/CEO

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: C5048058

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Harold Goldberg

Mailing Address 3543 Amberacres Dr  
Apt 305

City

Cincinnati

State

OH

Zip Code

45237-2534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	9	/	2	0	0	8

Transaction ID: C5030001

Amount of Each Receipt this Period

1400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Jeffrey Scott Goldenberg

Mailing Address 7860 Ivygate Lane

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Murdock Goldenberg Schnei-  
der & Groh

Occupation

Attorney

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: C4958463

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1950.00

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

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

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

FOR LINE NUMBER: PAGE 56 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Bethe Goldenfield

Mailing Address 8307 Achterman Rd

City

Pleasant Plain

State

OH

Zip Code

45162

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
none

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 7 / 2 0 0 8

Transaction ID: C4939417

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Bethe Goldenfield

Mailing Address 8307 Achterman Rd

City

Pleasant Plain

State

OH

Zip Code

45162

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
none

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: C4987788

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Bethe Goldenfield

Mailing Address 8307 Achterman Rd

City

Pleasant Plain

State

OH

Zip Code

45162

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
none

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: C5005862

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

75.00

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

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

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

FOR LINE NUMBER: PAGE 57 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Bethe Goldenfield

Mailing Address 8307 Achterman Rd

City

Pleasant Plain

State

OH

Zip Code

45162

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
none

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5049864

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Bethe Goldenfield

Mailing Address 8307 Achterman Rd

City

Pleasant Plain

State

OH

Zip Code

45162

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
none

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050251

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

R. Jeffrey Goldsmith, MD

Mailing Address 521 Milton St

City

Cincinnati

State

OH

Zip Code

45202-6824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cincinnati VA Medical Center

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1075.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5025912

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

475.00

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

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

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

FOR LINE NUMBER: PAGE 58 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Neil Goldstein

Mailing Address 519 Idlewild Circle

City

State

Zip Code

Media

PA

19063

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Grant Writer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5044074

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Kenneth Goode

Mailing Address 9557 Ross Ave.

City

State

Zip Code

Cincinnati

OH

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cincinnati Symphony Orche-  
stra

Occupation

Arts Administrator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: C5022721

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Edward C Goodwin

Mailing Address 559 Short Beach Rd

City

State

Zip Code

Stratford

CT

06615-7630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
yale university

Occupation

research scientist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 8

Transaction ID: C5013130

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 59 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

James M Gould

Mailing Address 312 Walnut St.

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Walnut Group

Occupation

Managing General Partner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Transaction ID: C4989863

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Laurie J Gould

Mailing Address 334 Franklin Street

City

Newton

State

MA

Zip Code

02458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VIVA Consulting

Occupation

Housing Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051598

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Jerry R. Graham

Mailing Address 12154 WAYWOOD DRIVE

City

TWINSBURG

State

OH

Zip Code

44087

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation

NOT EMPLOYED

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5054772

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1300.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Katherine Green

Mailing Address 190 E 72nd St  
Apt 33c

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Literary Agent

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: C4992991

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Roger A Greenbaum

Mailing Address 7882 Washington Ave

City State Zip Code  
Sebastopol CA 95472-3538

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Law Offices of Roger A.  
Greenbaum

Occupation  
Attorney and Mediator

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052075

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Evelyn D Griffiths

Mailing Address 7924 Jolain Drive

City State Zip Code  
Cincinnati OH 45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US INTERNAL REVENUE SERVI-  
CE

Occupation  
REVENUE agent

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: C5028137

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Nancy K Griffiths

Mailing Address 1075 Wilson Dunham

City

New Richmond

State

OH

Zip Code

45157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: C5000415

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Richard A Grossman, MD, MPH

Mailing Address 800 Heartwood Lane  
#11

City

Bayfield

State

CO

Zip Code

81122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029507

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Joel Gunter

Mailing Address 10807 Stockbridge Lane

City

Cincinnati

State

OH

Zip Code

45249

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Children's Hospital Medic-  
al Center

Occupation  
Anesthesiologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5050114

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 62 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Wendy Gustafson

Mailing Address 6261 Sweet Briar Court

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self--retired

Occupation

vocal arts instructor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: C5005955

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Wendy Gustafson

Mailing Address 6261 Sweet Briar Court

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self--retired

Occupation

vocal arts instructor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5105351

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

J C David Charles David Hadden

Mailing Address 10 Talcott Mt Road

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinson & Cole

Occupation

Partner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5170398

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 63 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Bruce Hager

Mailing Address 1021 Saint Gregory St

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brandimage - Desgrippes  
& Laga

Occupation

Designer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: C5020359

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

william halstead

Mailing Address 973 stone valley ln.

City

milford

State

OH

Zip Code

45150

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Siemens

Occupation

Engineering Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: C5022707

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Bruce A Hamilton

Mailing Address 1194 Apple Hill Road

City

Cincinnati

State

OH

Zip Code

45230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IDCC

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043202

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 64 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Theodore C. Hanf

Mailing Address 13521 Magnolia

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kegel, Tobin & Truce

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5030887

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mary F Hanley

Mailing Address 818 Connecticut Avenue, NW  
Suite 900

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Association for  
Biomedical Re

Occupation

Executive Vice President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 8

Transaction ID: C4991476

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Jerald D. Hansing

Mailing Address 1735 Franklin Blvd

City

Portsmouth

State

OH

Zip Code

45662-3106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Ohio Radiologist-  
s, Inc.

Occupation

Radiologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041518

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1250.00

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

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

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

FOR LINE NUMBER: PAGE 65 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Michelle Harcha

Mailing Address College of Veterinary Medicine 127  
1900 Coffey Road

City State Zip Code  
Columbus OH 43210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio State University

Occupation  
Director of Alumni Services & Prof. De

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041582

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

David Harris

Mailing Address 7699 Twin Lakes Dr

City State Zip Code  
morrow OH 45152

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Loveland City Schools

Occupation  
Counselor

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: C4988562

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

David Harris

Mailing Address 7699 Twin Lakes Dr

City State Zip Code  
morrow OH 45152

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Loveland City Schools

Occupation  
Counselor

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051963

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 66 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Donald Harrison, M.D.

Mailing Address 9250 Old Indian Hill Rd

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UC

Occupation

physician administrator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050551

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Kathleen J. Hart

Mailing Address 5593 Bayberry Drive

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Xavier University

Occupation

Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

398.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 8

Transaction ID: C5013132

Amount of Each Receipt this Period

199.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Martin Haskell

Mailing Address 6650 Given Rd

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053424

Amount of Each Receipt this Period

1550.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2249.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Valerie Haskell

Mailing Address 6650 Given Rd.

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Forte Management Corp

Occupation

Executive

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: C5053418

Amount of Each Receipt this Period

1550.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

Dorothy B Hatic

Mailing Address P. O. Box 221

City

Milford

State

OH

Zip Code

45150

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCS Sanitation Management,  
Inc.

Occupation

Human Resources Specialist

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	3	/	2	0	0	8

Transaction ID: C5041501

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Mary Hattermer

Mailing Address 9846 Old Chimney Ct

City

Blue Ash

State

OH

Zip Code

45241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Helen Holtman, MD and Asso-  
c.

Occupation

Therapist

Receipt For: 2008

☐ Primary ☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	0	8

Transaction ID: C5000466

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1900.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Barbara J. Heil

Mailing Address 1884 Columbia Road, NW  
Apt. 610City State Zip Code  
Washington DC 20009FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
NoneReceipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4989530

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

Nelson Helm

Mailing Address 4112 Massie Av 3

City State Zip Code  
Louisville KY 40207-2179FEC ID number of contributing  
federal political committee.

C

Name of Employer  
noneOccupation  
noneReceipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
350.00

Date of Receipt

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

Transaction ID: C4958736

Amount of Each Receipt this Period

350.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Kathy F. Helmbock

Mailing Address 4021 Paxton Ave

City State Zip Code  
Cincinnati OH 45209FEC ID number of contributing  
federal political committee.

C

Name of Employer  
reiredOccupation  
was a direct mail managerReceipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 7 / 2 0 0 8

Transaction ID: C5005554

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 69 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Kathy F. Helmbock

Mailing Address 4021 Paxton Ave

City

Cincinnati

State

OH

Zip Code

45209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
reired

Occupation

was a direct mail manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5048550

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ina Hendrix

Mailing Address 6891 St. Rt. 125

City

West Union

State

OH

Zip Code

45693

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051351

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Jane Henney, M.D.

Mailing Address 1135 Fort View Pl

City

Cincinnati

State

OH

Zip Code

45202-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UC

Occupation

physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051265

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 70 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Tina M Herald

Mailing Address 2751 8 Mile Raod

City

Cincinnati

State

OH

Zip Code

45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

not employed

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: C5014744

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Nancy C. Heslop

Mailing Address 950 Merriman Rd

City

Akron

State

OH

Zip Code

44303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired/volunteer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5027466

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Michael Howett

Mailing Address 2916 Grandin Rd

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Gynecologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043680

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 71 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Timothy Hsu

Mailing Address 34-47 86th Street

City

Jackson Heights

State

NY

Zip Code

11372

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eisai Medical Research

Occupation

Associate Vice President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051334

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Samuel H Huang

Mailing Address 298 Glen Lake Road

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Cincinnati

Occupation

Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041302

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Richard L. Huberman

Mailing Address 2141 P St NW  
Apt 302

City

Washington

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Occupational Safety & Health Review Co

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4989691

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Carl F. Hughes

Mailing Address 1640 Dublin Road

City

Marion

State

OH

Zip Code

43302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fahey BankOccupation  
Banker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: C5052462

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

John J Hutton, Sr.

Mailing Address 6913 Fox Hill Lane

City

Cincinnati

State

OH

Zip Code

45236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of CincinnatiOccupation  
professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	0	8

Transaction ID: C4938129

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

John M. Isidor

Mailing Address 6755 Fair Acres Drive

City

Cincinnati

State

OH

Zip Code

45213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Schulman Associates IRB.  
IncOccupation  
CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	9	/	2	0	0	8

Transaction ID: C5030070

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3800.00

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

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

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

FOR LINE NUMBER: PAGE 73 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Lisa Cantor Jacobson

Mailing Address 1230 Sweetwater Drive

City

Cincinnati

State

OH

Zip Code

45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univ of Cincinnati

Occupation  
Doctor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: C5028042

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Roy H. Jacobson

Mailing Address 1230 Sweetwater Dr

City

Cincinnati

State

OH

Zip Code

45215-2042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UC

Occupation  
MD

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043823

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Miles Jaffe

Mailing Address PO Box 194

City

Chilmark

State

MA

Zip Code

02535-0194

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5031267

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 74 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Kenneth D Jameson

Mailing Address 9025 Spooky Ridge Ln

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cohen, Todd, Kite and Sta-  
ndford

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5050117

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Rudy J Jasko

Mailing Address 2368 Northland Ave

City

Lakewood

State

OH

Zip Code

44107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: C5015224

Amount of Each Receipt this Period

75.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Charles Wood Jewett, Jr

Mailing Address 1616 SW Harbor Way  
Unit 408

City

Portland

State

OR

Zip Code

97201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Nevada

Occupation

Retired English Instructor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1595.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041415

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

425.00

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

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

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

FOR LINE NUMBER: PAGE 75 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Martha Stuart Jewett

Mailing Address 5318 Colorado Ave NW

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

RN

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 8

Transaction ID: C4956680

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Kevin Warren Johnson

Mailing Address 607 Chillicothe Street  
The Loft

City

Portsmouth

State

OH

Zip Code

45662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

790.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 8

Transaction ID: C4959927

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Kevin Warren Johnson

Mailing Address 607 Chillicothe Street  
The Loft

City

Portsmouth

State

OH

Zip Code

45662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

790.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 8

Transaction ID: C5005423

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

200.00

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

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

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

FOR LINE NUMBER: PAGE 76 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Kevin Warren Johnson

Mailing Address 607 Chillicothe Street  
The Loft

City State Zip Code  
Portsmouth OH 45662

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation  
Retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
790.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5042898

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

William C. H. Joiner

Mailing Address 7290 Greenfarms Dr

City State Zip Code  
Cincinnati OH 45224

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043688

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Nathaniel R Jones

Mailing Address 1700 PNC Center  
201 East Fifth Street

City State Zip Code  
Cincinnati OH 45202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Blank Rome LLP

Occupation  
Attorney/retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: C5000533

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1300.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Jill Joyce

Mailing Address P.O. Box 1250

City

Millersville

State

MD

Zip Code

21108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
psychiatrist

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	0	8

Transaction ID: C4943849

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Charles M. Judd

Mailing Address 3939 Erie Ave. Apt. 507

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	7	/	2	0	0	8

Transaction ID: C5028094

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

John Steven Karabaic

Mailing Address 3545 Zumstein Ave

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KACE NetworksOccupation  
Engineer

Receipt For: 2008

☐ Primary
☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: C5048370

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 78 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Wayne J Katon

Mailing Address 4852 NE 41st

City

Seattle

State

WA

Zip Code

98105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UW Medical Center

Occupation  
physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5025803

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Julane L Katz

Mailing Address 7300 Dearwester Dr  
Apt. 124

City

Cincinnati

State

OH

Zip Code

45236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043572

Amount of Each Receipt this Period

1050.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ava Kaufman

Mailing Address 8302 Melody Ct

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bethesda Internal Medicine

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4990450

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 79 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Kimberly Keeney

Mailing Address 29367 Dutchmans Lane

City

Easton

State

MD

Zip Code

21601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boeing

Occupation

Director of Business Development

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4989842

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Donald W Kelley

Mailing Address 3168 Pond Run Rd.

City

New Richmond

State

OH

Zip Code

45157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Artist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: C5005976

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

George P. Kent

Mailing Address 15850 Rose Ave.

City

Los Gatos

State

CA

Zip Code

95030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FMASJ, Inc.

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 8

Transaction ID: C4992358

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 80 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Sandra Kesner

Mailing Address 3431 Duncan Avenue

City State Zip Code  
 Cincinnati OH 45219

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
University Internal Medicine Associate

Occupation  
Nurse Practitioner

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 0 / 2 0 0 8

Transaction ID: C5022732

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Thomas Kimmell

Mailing Address 1131 Saint Paul St

City State Zip Code  
 Denver CO 80206

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Karlengo & Kimmell, LLC

Occupation  
Attorney

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 0 / 2 0 0 8

Transaction ID: C5000417

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Margaret Kite

Mailing Address 3020 Arborcreek Dr.

City State Zip Code  
 Cincinnati OH 45242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

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

Transaction ID: C4959567

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 81 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Thomas A Kleewein

Mailing Address 6118 Churchwood Ln

City

Greendale

State

WI

Zip Code

53129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
La Macchia Enterprises,  
Inc

Occupation

Software Engineer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5050429

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Robert A Klingler

Mailing Address 6223 Orchard Lane

City

Cincinnati

State

OH

Zip Code

45213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5030689

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Denise Knecht

Mailing Address 1721 Fulton Rd

City

Cleveland

State

OH

Zip Code

44113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Lawyer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: C5022422

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 82 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Gary Knisely

Mailing Address 471 Haddock Hill Road

City

Old Chatham

State

NY

Zip Code

12136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Investor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: C5028134

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Joan C Knoll

Mailing Address 3900 Dorset Dr.

City

Dayton

State

OH

Zip Code

45405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
n/a

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 8

Transaction ID: C4943768

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Jeremy B. Koch

Mailing Address 295 Greenwich St  
Apt 7B

City

New York

State

NY

Zip Code

10007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Magazine Publishers of America

Occupation  
Publishing Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004929

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2800.00

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

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

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

FOR LINE NUMBER: PAGE 83 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Victor A. Kovner

Mailing Address 27 W 67th St

City

New York

State

NY

Zip Code

10023-6258

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Davis Wright Tremaine

Occupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004871

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Robert Michael Lamb

Mailing Address 1247 Fagins Run Road

City

New Richmond

State

OH

Zip Code

45157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robert A. Klingler Co. LPA

Occupation  
Lawyer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5050113

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Deborah Landesman

Mailing Address 240 Riverside Blvd  
Apt. 2A

City

New York

State

NY

Zip Code

10069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004865

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3050.00

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

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

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

FOR LINE NUMBER: PAGE 84 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Rocco Landesman

Mailing Address 240 Riverside Blvd  
Apt. 2A

City State Zip Code  
New York NY 10069-1024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
JUJAMCYN THEATRES

Occupation  
PRODUCER

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004863

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

David A. Lane

Mailing Address 1728 Old Farm Dr.

City State Zip Code  
Loveland OH 45140

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Lane & Company Communicat-  
ions Inc.

Occupation  
Consultant

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050324

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John Langan

Mailing Address 58 Holly Oak Dr.

City State Zip Code  
Voorhees NJ 08043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Townsend Press

Occupation  
President of Company

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5027321

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4700.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Doloris F. Learmonth

Mailing Address 3498 Forest Oak Court

City

Cincinnati

State

OH

Zip Code

45208-1842

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Peck Shaffer and Williams  
LLP

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: C5043692

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

William J. Leibold

Mailing Address 2415 Hillview Ave

City

Dayton

State

OH

Zip Code

45419

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dinsmore & Shohl

Occupation

attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: C5022147

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Gary Lent

Mailing Address 7764 Shadywoods Ct

City

Cincinnati

State

OH

Zip Code

45244-2832

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C4959710

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**SUBTOTAL** of Receipts This Page (optional) .....

600.00

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

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

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

FOR LINE NUMBER: PAGE 86 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Gary Lent

Mailing Address 7764 Shadywoods Ct

City

Cincinnati

State

OH

Zip Code

45244-2832

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5050127

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John Timothy Leonard

Mailing Address 3033 Springer Ave

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Xavier University

Occupation

Adjuncy Professor, Education

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5047878

Amount of Each Receipt this Period

800.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Stephen Lerner

Mailing Address 6715 W. Beechlands Drive

City

Cincinnati

State

OH

Zip Code

45237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Squire, SAnders & Dempsey

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5047976

Amount of Each Receipt this Period

750.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 87 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Marcia W. Levine

Mailing Address 2678 Rochester Rd

City

Shaker Heights

State

OH

Zip Code

44122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5054768

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Christina Liao

Mailing Address 1317 Club View Drive

City

Los Angeles

State

CA

Zip Code

90024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

none

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: C5020290

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Phil Lichtenstein

Mailing Address 601 Stanley Ave

City

Cincinnati

State

OH

Zip Code

45226-1736

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5125880

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3400.00

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

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

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

FOR LINE NUMBER: PAGE 88 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Martha Wells Lifschin

Mailing Address 90 Upper Rainbow Trail

City

Denville

State

NJ

Zip Code

07834

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consultant

Occupation  
Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004860

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Constance Joan Lighthall

Mailing Address 785 Greenmound Road

City

New Richmond

State

OH

Zip Code

45157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Burke, Inc.

Occupation  
Programmer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 8

Transaction ID: C5012552

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Margo Lion

Mailing Address 246 W 44th St  
8th floor

City

New York

State

NY

Zip Code

10036-3910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Margo Lion Ltd

Occupation  
producer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 8

Transaction ID: C5005290

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1350.00

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

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

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

FOR LINE NUMBER: PAGE 89 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Vickrey Lodal

Mailing Address 1651 Quail Hollow Ct.

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C4987972

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Paul A London, Ph.D.

Mailing Address 3314 Ross Place NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Economist/Writer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5049239

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John C. Loper

Mailing Address 6315 Parkman Place

City

Cincinnati

State

OH

Zip Code

45213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N?A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: C5014904

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 90 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Gilbert Lowenthal, M.D., M.B.

Mailing Address 14302 Shaker Blvd.

City

Cleveland

State

OH

Zip Code

44120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cleveland Clinic Founda-  
tion

Occupation

Physician, Dept of General Internal Me

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050540

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mary Lux

Mailing Address 1650 Circle Lane SE #123

City

Lacey

State

WA

Zip Code

98503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5043410

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Pamela F Lynam, M.D.

Mailing Address 1615 Thames St  
Baltimore

City

Baltimore

State

MD

Zip Code

21231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Johns Hopkins University

Occupation

physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5050433

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Sandra Hatch Macdonell

Mailing Address 3845 Miami Run

City

Cincinnati

State

OH

Zip Code

45227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Cincinnati

Occupation

Business Advisor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	8

Transaction ID: C4988333

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Sandra Hatch Macdonell

Mailing Address 3845 Miami Run

City

Cincinnati

State

OH

Zip Code

45227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Cincinnati

Occupation

Business Advisor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: C5050435

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Wendy Mackenzie

Mailing Address 829 Park Ave

City

New York

State

NY

Zip Code

10021-2846

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	0	8

Transaction ID: C5005552

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2650.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey Baldwin Maletta

Mailing Address 2800 36th Street N.W.

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
K&L Gates LLP

Occupation  
lawyer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5049893

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Inayat K. Malik, MD

Mailing Address 8905 Spooky Ridge Lane

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Urology Group

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5026208

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Michael J Maloney

Mailing Address 3728 Eastern Hills Lane

City

Cincinnati

State

OH

Zip Code

45209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cincinnati Center

Occupation  
physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5030705

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 93 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

William R. Maloni, Sr.

Mailing Address 5 Chevy Chase Circle

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4989535

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

James Edward Manning

Mailing Address PO Box 95

City

Tsaile

State

AZ

Zip Code

86556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Indian Health Service

Occupation

physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5030607

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Richard V. Manoukian

Mailing Address 108 Wagon Road Lane

City

Terrace Park

State

OH

Zip Code

45174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

N/A

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: C5022424

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Charles Margolis

Mailing Address 24 Fallen Branch

City

Blue Ash

State

OH

Zip Code

45241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Family Physi-  
cians

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5042891

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Jennifer Margolis

Mailing Address 24 Fallen Branch

City

Cincinnati

State

OH

Zip Code

45241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Family Physi-  
cians, Inc.

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051019

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Emily J. Marsh

Mailing Address 1619 Alcor Ter

City

Cincinnati

State

OH

Zip Code

45230-2013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Zimmerman & Co. CPA's Inc.

Occupation  
Accountant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5049616

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

250.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Gerald Martin

Mailing Address 2651 Moore Saur Rd

City

Morrow

State

OH

Zip Code

45152-8621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C4987930

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

James R Mason

Mailing Address 728 Elm Avenue

City

Terrace Park

State

OH

Zip Code

45174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Beech Acres Parenting Cen-  
ter

Occupation

Not-for-profit Chief Executive Office

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051358

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

BeLinda Mathie

Mailing Address 1219 West Cottage Place

City

Chicago

State

IL

Zip Code

60607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Katten Muchin Rosenman LLP

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5038660

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

J. Gray McBride

Mailing Address PO Box 22010

City

Santa Fe

State

NM

Zip Code

87502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C4938138

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

J. Gray McBride

Mailing Address PO Box 22010

City

Santa Fe

State

NM

Zip Code

87502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 8

Transaction ID: C5013106

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

susan R. mccaslin

Mailing Address 180 Main St.

City

Andover

State

MA

Zip Code

01810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phillips Academy

Occupation  
teacher

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5030679

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Deborah E. McFarland

Mailing Address 241 Vista Verde  
P.O. Box 1106

City State Zip Code  
Carmel Valley CA 93924-9609

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 0 5 / 2 0 0 8

Transaction ID: C4990402

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Joseph McGill

Mailing Address 96 Old Garrison Road

City State Zip Code  
Sudbury MA 01776

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
University of Massachuset-  
ts Medical Sc

Occupation  
Social Worker

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 3 / 2 0 0 8

Transaction ID: C5005327

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Marianne Smith McGrath, M.D.

Mailing Address 3137 Brookwood Dr

City State Zip Code  
Edgewood KY 41017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
self

Occupation  
physician (psychiatrist)

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029256

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1450.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Michael McRee

Mailing Address P.O. Box 1006

City

Jackson

State

MS

Zip Code

39215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
investek timber managemen-  
et

Occupation  
chairman

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041511

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Martha H Melvoin

Mailing Address 139 S. Medio Drive

City

Los Angeles

State

CA

Zip Code

90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
Interior Designer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052022

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Richard Ira Michelman

Mailing Address 1 Broadview Place

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michelman, Inc.

Occupation  
Vice President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041968

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1700.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

James A Miller

Mailing Address 6 Grandin Lane

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bartlett and Company

Occupation

Investment Counselor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5049144

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Jonathan B Miller

Mailing Address 2507 17TH ST NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MANDU RESTAURANT

Occupation

SERVER

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4990451

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Leslie Miller

Mailing Address 8234 Forest Road

City

Cincinnati

State

OH

Zip Code

45255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

ATS

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029242

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1350.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Richard Tyler Miller

Mailing Address 2915 Eaton Rd.

City

Shaker Heights

State

OH

Zip Code

44122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Case-Western Reserve Univ-  
esity, VA

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Occupation

Physician, Researcher

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050036

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

George Moeller

Mailing Address 3577 Raymar Blvd

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Manley Burke

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Occupation

Attorney

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: C5017802

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Michael J Mooney

Mailing Address 978 Avondale Ave

City

Cincinnati

State

OH

Zip Code

45229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Occupation

lawyer

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5026563

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 101 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Frederick JR Morgan

Mailing Address 4907 Klatte Road

City State Zip Code  
 Cincinnati OH 45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morgan Verkamp LLC

Occupation  
Attorney

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051105

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Vivian Kay Morgan

Mailing Address 10765 Fallsington Court

City State Zip Code  
 Cincinnati OH 45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050037

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Dena A Morris

Mailing Address 530 Hills Fork Lane

City State Zip Code  
 West Union OH 45693

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Adams County/Ohio Valley  
Schools

Occupation  
high school teacher

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 269.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

Transaction ID: C5050458

Amount of Each Receipt this Period

48.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

298.00

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

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

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

FOR LINE NUMBER: PAGE 102 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Margaret E. Morris

Mailing Address 9816 Old Chimney Ct

City

Cincinnati

State

OH

Zip Code

45241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marthan Inc

Occupation  
Marketing

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051985

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Robert Mosberg

Mailing Address 1 Dowling Court

City

Old Westbury

State

NY

Zip Code

11568

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wachovia Securities

Occupation  
Stockbroker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004862

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Dania Moss

Mailing Address 4600 N Rodeo Gulch Rd

City

Soquel

State

CA

Zip Code

95073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
naturalist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043510

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2700.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Diya F. Mutasim

Mailing Address 7801 Keller Road

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Cincinnati

Occupation  
Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C4932134

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Patricia Nakaoki

Mailing Address 1145 Immaculate Lane

City

Cincinnati

State

OH

Zip Code

45255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050334

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Robert Needlman

Mailing Address 31076 Park Lane Dr.

City

Pepper Pike

State

OH

Zip Code

44124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MetroHealth Medical Center

Occupation  
pediatrician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050246

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Patricia A. Nelson

Mailing Address 1027 Northwoods Trail

City

Mc Lean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OB-C Group, LLC

Occupation  
lobbyist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4989835

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Gwyneth J Neuss

Mailing Address 330 Reily Road

City

Cincinnati

State

OH

Zip Code

45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wyoming City Schools

Occupation  
RN, BSN, NCSN

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5026543

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Carla S. O'Day

Mailing Address 19425 Frazier Drive

City

Rocky River

State

OH

Zip Code

44116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: C4938139

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Carla S. O'Day

Mailing Address 19425 Frazier Drive

City

Rocky River

State

OH

Zip Code

44116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050514

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mark O'Donnell

Mailing Address 202 Riverside Dr. #8 E

City

New York

State

NY

Zip Code

10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
playwright/author

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004858

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Jacqueline Orsi

Mailing Address 4463 Ward Rd.

City

Morrow

State

OH

Zip Code

45152

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jewish Family Services

Occupation  
Development Director

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5048591

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

L. Susan Pace

Mailing Address 7193 Foxview Drive

City

Cincinnati

State

OH

Zip Code

45230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	0	8

Transaction ID: C5020296

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Morris H. H Passer

Mailing Address 3126 Ononta Ave.

City

Cincinnati

State

OH

Zip Code

45226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	0	8

Transaction ID: C5043586

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Roger Peele

Mailing Address P.O. Box 1040

City

Rockville

State

MD

Zip Code

20849

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montgomery County Govern-  
ment, MarylandOccupation  
Psychiatrist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: C4959585

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 107 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

George Perbix

Mailing Address 3049 Arborcreek Ln.

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 8

Transaction ID: C4999385

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Anthony J Perzigian

Mailing Address 7000 Stonington Drive

City

Cincinnati

State

OH

Zip Code

45230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Cincinnati

Occupation  
Administrator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050241

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Frank Proto

Mailing Address 1191 Eversole Road

City

Cincinnati

State

OH

Zip Code

45230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Composer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 8

Transaction ID: C4949058

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1300.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Doreen A. Quinn

Mailing Address 569 Evanswood Place

City State Zip Code  
 Cincinnati OH 45220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation  
Retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029233

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Muhit U Rahman, Jr.

Mailing Address 8550 Willow Run Ct.

City State Zip Code  
 Cincinnati OH 45243

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Arcade Partners

Occupation  
Private Equity

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 5 / 2 9 / 2 0 0 8

Transaction ID: C5012096

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Donald S Ralston

Mailing Address 5888 Stonebridge Cir Apt 302

City State Zip Code  
 Milford OH 45150

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
n/a

Occupation  
retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 6 / 2 0 0 8

Transaction ID: C5027467

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2100.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Edyce Rau

Mailing Address 8681 Twilight Tear Lane

City

Cincinnati

State

OH

Zip Code

45249

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052487

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Robert H. Rawson, Jr.

Mailing Address 21300 Brantley Rd

City

Shaker Heights

State

OH

Zip Code

44122-1936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jones Day

Occupation

Attorney

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5054776

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Dorothy Foster Reed

Mailing Address 142 E. 71st. #2a

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self employed

Occupation

photographer

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041321

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Jane L Reed

Mailing Address 18 Chattanooga St.

City

San Francisco

State

CA

Zip Code

94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Film Maker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5048600

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Bradley Rich

Mailing Address 175 East 400 South  
Suite 400

City

Salt Lake City

State

UT

Zip Code

84111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Investor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: C4996434

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Gareth H. Richards

Mailing Address 6567 Windfield Court

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GE Aviation

Occupation

Executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050259

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Melody Sawyer Richardson

Mailing Address 16 Elmhurst Pl

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Corney & Shepard

Occupation

Realtor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	0	8

Transaction ID: C4939549

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Cary Ridder

Mailing Address 5520 Carolina Place NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Theodore Roosevelt Conser-  
vation Partne

Occupation

Director of Development

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	0	8

Transaction ID: C5012884

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Marie Ridder

Mailing Address 1219 Crest Lane

City

Mc Lean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	1	/	2	0	0	8

Transaction ID: C4989545

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Stephanie Ridder

Mailing Address 1490 North Poes Rd.

City

Flint Hill

State

VA

Zip Code

22627

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
George Washington Univers-  
ity

Occupation

law professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050039

Amount of Each Receipt this Period

1300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

David W Rintels

Mailing Address 9696 Culver Blvd  
#203

City

Culver City

State

CA

Zip Code

90232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5049130

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Barbara Rinto

Mailing Address 2388 Dana Avenue

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Cincinnati

Occupation

Administrator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5042845

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1800.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Steve Rock

Mailing Address 8017 Deer Shadow Lane

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US EPA

Occupation

Environmental Engineer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5050673

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Martin Rose

Mailing Address 3552 Hopper Hill Road

City

Cincinnati

State

OH

Zip Code

45255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SHP

Occupation

architect

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043562

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

David E Rosenberg

Mailing Address 108 Whittier Circle

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Booz Allen Hamilton

Occupation

Management Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: C4987792

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

David E Rosenberg

Mailing Address 108 Whittier Circle

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Booz Allen Hamilton

Occupation

Management Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: C5052359

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Lois R Rosenthal

Mailing Address 8 Melville Ln

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CET

Occupation

Partner

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: C4933651

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Richard H Rosenthal

Mailing Address 8 Melville Ln.

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROSENTHAL GROUP

Occupation

REALTOR

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: C4933653

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4650.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Stanley M Rowe, Jr.

Mailing Address 7100 Dearwester Dr #211

City

Cincinnati

State

OH

Zip Code

45236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5043414

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Michael S Royce

Mailing Address 2212 Veteran Ave

City

Los Angeles

State

CA

Zip Code

90064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HBO

Occupation

TV Writer/Producer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051457

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Donald L. Rucknagel

Mailing Address 621 Mehring Way

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Hospital

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5044003

Amount of Each Receipt this Period

650.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3450.00

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

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

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

FOR LINE NUMBER: PAGE 116 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Avima M. Ruder

Mailing Address 3316 Woodford Road

City

Cincinnati

State

OH

Zip Code

45213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USHHS/PHS/CDC

Occupation

epidemiologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050579

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Paul M. Rudolf

Mailing Address 9110 North Branch Drive

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Arnold & Porter LLC

Occupation

Senior Healthcare Advisor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 8

Transaction ID: C4959983

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Andy Rumer

Mailing Address 155 Jackson St. Apt. 401

City

San Francisco

State

CA

Zip Code

94111-1921

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

CPA

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: C4944055

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2650.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Treadwell Ruml

Mailing Address 102 Kathi Street

City

Redlands

State

CA

Zip Code

92373

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California State Universi-  
ty

Occupation

Professor of English

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051594

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Barney Rush

Mailing Address 6917 Maple Ave

City

Chevy Chase

State

MD

Zip Code

20815-5113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
H2Gen Innovations, Inc.

Occupation

CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4989540

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

George L Russell

Mailing Address 333 E. Westminster, 3A

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Marketing

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5050245

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 118 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Joshua Sands

Mailing Address 8501 Whisperwood Lane

City

Cincinnati

State

OH

Zip Code

45249

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cincinnati Eye Institute

Occupation

Ophthalmologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: C5014459

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Carol A Sanger

Mailing Address 8450 Willow Run Court

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004868

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Carol A Sanger

Mailing Address 8450 Willow Run Court

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation

retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029244

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 119 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Vincent Michael Scarpinato, M.D., F.A.

Mailing Address 1707 Franklin Blvd

City

Portsmouth

State

OH

Zip Code

45662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Ohio Medical Cen-  
ter

Occupation  
Surgeon

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051346

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mary Ann Schenk

Mailing Address 10862 Kristiridge Drive

City

Cincinnati

State

OH

Zip Code

45252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
frost brown todd llc

Occupation  
attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043693

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Laura Scheuer

Mailing Address 610 West End Ave

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: C4993010

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 120 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

James Schiff

Mailing Address 2 Forest Hill Drive

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
university of cincinnati

Occupation  
professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050564

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Judith Schmidt

Mailing Address 1420 Riverside Dr.

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Cincinnati

Occupation  
Assistant Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050523

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Steven J. Shifman

Mailing Address 7431 E. Aracoma Dr.

City

Cincinnati

State

OH

Zip Code

45237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michelman Inc.

Occupation  
President & CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C4940638

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 121 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Arthur Shriberg

Mailing Address 7134 White Oak Ct.

City

Mason

State

OH

Zip Code

45040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Xavier University

Occupation  
Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: C5043945

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Erica Simmons

Mailing Address 612 W. Surf Street  
Apt. 4B

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Chicago

Occupation  
Graduate Student/Teaching Assistant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: C5025648

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Diana Stuart Sinton

Mailing Address 1437 Diamond Court

City

Redlands

State

CA

Zip Code

92374

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Redlands

Occupation  
Director

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C4931224

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1150.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Diana Stuart Sinton

Mailing Address 1437 Diamond Court

City

Redlands

State

CA

Zip Code

92374

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Redlands

Occupation

Director

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	1	/	2	0	0	8

Transaction ID: C4989308

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Diana Stuart Sinton

Mailing Address 1437 Diamond Court

City

Redlands

State

CA

Zip Code

92374

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Redlands

Occupation

Director

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	0	8

Transaction ID: C5012759

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

George Robert Slama

Mailing Address P.O. Box 36676

City

Cincinnati

State

OH

Zip Code

45236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robert Half Management Re-  
sources

Occupation

Financial Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	8	/	2	0	0	8

Transaction ID: C5049855

Amount of Each Receipt this Period

350.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 123 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Richard P Sloan

Mailing Address 530 Canal St.

City

New York

State

NY

Zip Code

10013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbia University

Occupation  
researcher

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 8

Transaction ID: C4990273

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Alicia W Smith

Mailing Address 1401 K St NW  
12th Flr

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Smith-Free Group

Occupation  
consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 8

Transaction ID: C4990447

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Barbara P. Smith

Mailing Address 4911 Carlson Dairy Road

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: C4993699

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 124 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Edwin Richard Smith, III

Mailing Address 3235 Griest Ave.

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MeasureMeaningMatter, LLC

Occupation

Internet Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5041412

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Myfanwy Smith

Mailing Address 22 Rolling Hills Drive

City

Wyoming

State

OH

Zip Code

45215-1353

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: C4956661

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Myfanwy Smith

Mailing Address 22 Rolling Hills Drive

City

Wyoming

State

OH

Zip Code

45215-1353

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 8

Transaction ID: C5026805

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 125 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Robert Smith

Mailing Address 22 Rolling Hills Drive

City

Wyoming

State

OH

Zip Code

45215-1353

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: C4956664

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Robert Smith

Mailing Address 22 Rolling Hills Drive

City

Wyoming

State

OH

Zip Code

45215-1353

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 8

Transaction ID: C5026806

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Martha S Solano

Mailing Address 4622 Citation Court

City

Batavia

State

OH

Zip Code

45103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: C5025071

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 126 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Joseph S. Solomkin, M.D.

Mailing Address 5523 Arnsby Pl

City

Cincinnati

State

OH

Zip Code

45227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UC

Occupation  
Surgeon

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 8

Transaction ID: C5012570

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Robert Sorscher

Mailing Address 119 Ritchie Ave

City

Cincinnati

State

OH

Zip Code

45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Center for Children & Fam-  
ilies

Occupation  
Psychiatrist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051434

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John Spaccarelli, M.D.

Mailing Address 3303 Mannington Avenue

City

Cincinnati

State

OH

Zip Code

45226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
mercy health partners

Occupation  
physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 8

Transaction ID: C5050562

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

900.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Catherine S Steck

Mailing Address 329 West 87th Street

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
parent

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 8

Transaction ID: C4949095

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Richard Steiner

Mailing Address 4044 Rose Hill Ave.

City

Cincinnati

State

OH

Zip Code

45229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rick Steiner Productions,  
Inc

Occupation  
President

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: C4993696

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

therese f steiner

Mailing Address 10 hillcrest ave

City

yonkers

State

NY

Zip Code

10705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004875

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3050.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Bobbie Sterne

Mailing Address 3939 Erie Ave. Apt. 1120

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired - City Council

Occupation

Government Official

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5043728

Amount of Each Receipt this Period

1300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

James M. Stone

Mailing Address 695 Atlantic Ave.

City

Boston

State

MA

Zip Code

02111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Plymouth Rock Assuranc-  
ce Companies

Occupation

Executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043537

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Martin F Stone

Mailing Address 4113 Oliver St

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CCS Inc

Occupation

CFO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5027281

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2800.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Connie E Stoner

Mailing Address PO Box 1978

City

Portsmouth

State

OH

Zip Code

45662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shawnee State University

Occupation

Associate Director, Public Service

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5050124

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

George Strike

Mailing Address 422 Wards Corner Road, Ste. F

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Executive Work

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 7 / 2 0 0 8

Transaction ID: C4939550

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Katie W. Strike

Mailing Address 9904 Hunters Rune Lane

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: C5020686

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Ann M. Stuart

Mailing Address 11949 E Iowa Ave

City

Aurora

State

CO

Zip Code

80012

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: C4943560

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Rosemary Ann Stuart

Mailing Address 110 Livingston Street  
Apt. PHC

City

Brooklyn

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYC Dept. of Education

Occupation  
Superintendent

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004879

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Tom D. Sundermann

Mailing Address 1207 Herschel Woods Ln

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wachovia

Occupation  
Stockbroker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5048595

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Dan Tate

Mailing Address 700 13th St. N.W. Suite 400

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cassidy & Associates

Occupation  
attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 8

Transaction ID: C4990400

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

George L Ten Eyck

Mailing Address 8616 Sturbridge Drive

City

Cincinnati

State

OH

Zip Code

45236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tetra Tech NUS

Occupation  
Geologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: C5015235

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Robert C Terwillegar

Mailing Address 835 Center St

City

Milford

State

OH

Zip Code

45150-1303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
was educator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5043503

Amount of Each Receipt this Period

600.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1350.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey W. Thomas

Mailing Address 18 E 4th St  
Unit 802

City State Zip Code  
Cincinnati OH 45202-3714

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
catering

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: C4999891

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Judith B Titchener

Mailing Address 4021 Rose Hill Ave

City State Zip Code  
Cincinnati OH 45229-1524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052256

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Jerry Titko

Mailing Address 10475 Reading Rd

City State Zip Code  
Cincinnati OH 45241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: C5005868

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Kristin K Titko

Mailing Address 10475 Reading Road

City

Cincinnati

State

OH

Zip Code

45241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Podiatrist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5050990

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Andrew Tobias

Mailing Address 787 NE 71 St

City

Miami

State

FL

Zip Code

33138

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
writer

Occupation

self

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C4943537

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

James Torrey

Mailing Address 415 Roundhill Rd.

City

Greenwich

State

CT

Zip Code

06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Torrey Associate

Occupation

Chairman

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5057061

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1500.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Woodrow H. Uible

Mailing Address 3500 Michigan Ave.

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bartlett

Occupation

Investment Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029235

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Woodrow H. Uible

Mailing Address 3500 Michigan Ave.

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bartlett

Occupation

Investment Manager

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: C5030006

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Susan Varghese

Mailing Address 8275 Carolines Trail

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univeristy of Cincinnati

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 8 / 2 0 0 8

Transaction ID: C5029261

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

650.00

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

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

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Joseph M. Visci

Mailing Address 245 El Dorado Way

City

Shell Beach

State

CA

Zip Code

93449

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Tribune

Occupation  
Publisher

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5041911

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Barbara R. Voelkel

Mailing Address 4172 Sandgate Ct.

City

Cincinnati

State

OH

Zip Code

45241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Psychologist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Transaction ID: C4989865

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Henry C. Waite

Mailing Address 10251 Pendry Drive

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053461

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1050.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mary Anne Walsh

Mailing Address 3538 Narragansett Avenue

City

Annapolis

State

MD

Zip Code

21403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roetzel & Address

Occupation

Dir. of Government Relations

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	0	8

Transaction ID: C4989831

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Richard H. Ward

Mailing Address 2400 4th and Vine Tower  
One West Fourth Street

City

CINCINNATI

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DREW AND WARD

Occupation

ATTORNEY

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: C5057058

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

George H Warrington

Mailing Address 3125 Wold Ave

City

Cincinnati

State

OH

Zip Code

45207-1911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Construction

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: C5052299

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 137 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Ken Wasch

Mailing Address 3019 East Friends Road

City

Annapolis

State

MD

Zip Code

21401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Software & Information In-  
dustry Assn.

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052148

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Jane Cooney Waterhouse

Mailing Address 7275 Tangleridge Drive

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: C5005971

Amount of Each Receipt this Period

600.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Joan S. Wells

Mailing Address 2235 South Monroe St.

City

Denver

State

CO

Zip Code

80210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Denver Public Schools ret-  
ired

Occupation

teacher

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5060953

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1100.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Barry A. Weprin

Mailing Address 415 Claflin Ave.

City

Mamaroneck

State

NY

Zip Code

10543

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Milberg LLPOccupation  
attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: C5043383

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Sallie E. Westheimer

Mailing Address 1908 Dexter Ave

City

Cincinnati

State

OH

Zip Code

45206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
4 C FOR CHILDREN COMPREHENSIVE COMMUNITYOccupation  
DIRECTOR

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: C5053431

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Lisa M Wharton

Mailing Address 3867 Homewood Road

City

Cincinnati

State

OH

Zip Code

45227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Martin & Wharton LLPOccupation  
lawyer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: C5044044

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1550.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Cynthia S Wheeler

Mailing Address 7410 Miami Hills Dr

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

n/a

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	0	8

Transaction ID: C4990867

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Bonnie Kern White

Mailing Address 9517 Croton Dr

City

Cincinnati

State

OH

Zip Code

45242-7347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bonnie K White & Associat-  
es

Occupation

CEO

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	0	8

Transaction ID: C5026197

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Richard C. Wiggers

Mailing Address 7650 Brill Road

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roth Partnership, Inc.

Occupation

Architect

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	0	8

Transaction ID: C5030804

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 140 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

George J Wile

Mailing Address 5545 Drake Road

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: C4944069

Amount of Each Receipt this Period

1300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

George B Wilkinson

Mailing Address 1196 Apple Hill Rd

City

Cincinnati

State

OH

Zip Code

45230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dinsmore & Shohl

Occupation

Lawyer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051863

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Frederick Woebse

Mailing Address 3060 Fox Den Lane

City

Cincinnati

State

OH

Zip Code

45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Great American Insurance  
Group

Occupation

Insurance Executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: C5022445

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1650.00

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

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

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

FOR LINE NUMBER: PAGE 141 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

William K. Woods

Mailing Address 3750 Broadview Drive

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Applied Information Resources

Occupation

Non-profit executive

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051218

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

David B Worley

Mailing Address 1285 Cemetery Road

City

Peebles

State

OH

Zip Code

45660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NA

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5030686

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Drausin F. Wulsin

Mailing Address 8375 Spooky Hollow Rd.

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Bank

Occupation

banker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

579.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: C5028141

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 142 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Henry Harrison Wulsin

Mailing Address 425 Seabreeze Ave.

City

Palm Beach

State

FL

Zip Code

33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004866

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Henry Harrison Wulsin

Mailing Address 425 Seabreeze Ave.

City

Palm Beach

State

FL

Zip Code

33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051438

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Lucien Wulsin, Jr.

Mailing Address 2444 Wilshire Blvd. #415

City

Santa Monica

State

CA

Zip Code

90403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: C5005938

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 143 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Lucien Wulsin, Jr.

Mailing Address 2444 Wilshire Blvd. #415

City

Santa Monica

State

CA

Zip Code

90403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5052561

Amount of Each Receipt this Period

75.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Stuart C. Wulsin

Mailing Address 8875 Spooky Ridge Lane

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Civic Enterprises

Occupation

Policy Analyst

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2346.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: C5041410

Amount of Each Receipt this Period

40.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Winthrop H Wulsin

Mailing Address 44 Douglas Road

City

Lowell

State

MA

Zip Code

01852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRO Unlimited

Occupation

Recruiter

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5049336

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

615.00

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

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

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

FOR LINE NUMBER: PAGE 144 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Cora E Yamamoto

Mailing Address 1618 Carlin Lane

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

not employed

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 8

Transaction ID: C4988395

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Charles F. Yeiser

Mailing Address 8975 Old Indian Hill Road

City

Cincinnati

State

OH

Zip Code

45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C4944057

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Sophia Yen

Mailing Address 196 Tuscaloosa Ave

City

Atherton

State

CA

Zip Code

94027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Pediatrician

Receipt For: 2008

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1776.00

Date of Receipt

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

Transaction ID: C4957736

Amount of Each Receipt this Period

888.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1888.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Peg Yorkin

Mailing Address 433 S. Beverly Dr.

City

Beverly Hills

State

CA

Zip Code

90212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

philanthropist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: C5025165

Amount of Each Receipt this Period

1300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Lei Yu

Mailing Address 129 Berkley Ave

City

Belle Mead

State

NJ

Zip Code

08502-4636

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rutgers University

Occupation

educator

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	8

Transaction ID: C5004877

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Joshua Zimmerberg

Mailing Address 6913 Granby Street

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NIH

Occupation

Scientist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	0	8

Transaction ID: C5048537

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2300.00

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

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

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

FOR LINE NUMBER: PAGE 146 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Geraldine Zipperstein

Mailing Address 17557-D Ashbourne Ln

City

Boca Raton

State

FL

Zip Code

33496

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 6 / 2 0 0 8

Transaction ID: C4990901

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Tom J Zumbiel

Mailing Address 10606 Kenridge Dr.

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
Zumbiel Packaging

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: C5028132

Amount of Each Receipt this Period

1200.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Edward Zwick

Mailing Address 2029 Century Park East #500

City

Los Angeles

State

CA

Zip Code

90067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
producer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID: C4944050

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2350.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Edith Allen

Mailing Address 53 Richfield Road

City

Arlington

State

MA

Zip Code

02474

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
artist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 0 8

Transaction ID: C4960034A

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

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

Transaction ID: C4960034AB

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

Judith Avery

Mailing Address 2222 Hyde Street  
#7

City

San Francisco

State

CA

Zip Code

94109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Not employed

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C4942226A

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

500.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 8

Transaction ID: C4942226AB

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

William Ayer

Mailing Address 17135 Reimer St

City

Fountain Valley

State

CA

Zip Code

92708

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
self

Occupation

investor

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1620.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 0 8

Transaction ID: C5049323A

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049323AB

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

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earmarked through this or-  
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**SUBTOTAL** of Receipts This Page (optional) .....

250.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Charles R. Boswell

Mailing Address 9629 Carriage Run Circle

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N.A.

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5049286A

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049286AB

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

Maryke C. Cramerus

Mailing Address 2026 Banks St.

City

Houston

State

TX

Zip Code

77098

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
psychotherapist

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053939A

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

100.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053939AB

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Wulsin for Congress

Occupation

Political Consultant

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2306.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: C5022564A

Amount of Each Receipt this Period

1.01

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 8

Transaction ID: C5022564AB

Amount of Each Receipt this Period

1.01

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

1.01

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wulsin for Congress

Occupation

Political Consultant

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

2306.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: C5043020A

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	8

Transaction ID: C5043020AB

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.**C.**

Full Name (Last, First, Middle Initial)

emil (nmi) dansker, phd

Mailing Address 1319 stonemill ct.

City

cincinnati

State

OH

Zip Code

45215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation

retired

Receipt For: 2008

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	9	/	2	0	0	8

Transaction ID: C5022566A

Amount of Each Receipt this Period

15.01

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below

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

20.01

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 8

Transaction ID: C5022566AB

Amount of Each Receipt this Period

15.01

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Stephen Elliott

Mailing Address 490 Second Street #200

City

San Francisco

State

CA

Zip Code

94107

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Self

Occupation

Writer

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5053655A

Amount of Each Receipt this Period

700.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053655AB

Amount of Each Receipt this Period

700.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 153 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Sarah K Gideonse

Mailing Address 2570 Madison Rd., #20

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5049282A

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049282AB

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City

Cincinnati

State

OH

Zip Code

45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
writer

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1855.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: C5043031A

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

55.00

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

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

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

FOR LINE NUMBER: PAGE 154 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 8

Transaction ID: C5043031AB

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Bethe Goldenfield

Mailing Address 8307 Achterman Rd

City

Pleasant Plain

State

OH

Zip Code

45162

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
none

Occupation  
none

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5043049A

Amount of Each Receipt this Period

10.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 8

Transaction ID: C5043049AB

Amount of Each Receipt this Period

10.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

10.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

R. Jeffrey Goldsmith, MD

Mailing Address 521 Milton St

City

Cincinnati

State

OH

Zip Code

45202-6824

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Cincinnati VA Medical Cen-  
terOccupation  
Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1075.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	0	8

Transaction ID: C5049295A

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

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

C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	0	8

Transaction ID: C5049295AB

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.**C.**

Full Name (Last, First, Middle Initial)

Jerry R. Graham

Mailing Address 12154 WAYWOOD DRIVE

City

TWINSBURG

State

OH

Zip Code

44087

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
retiredOccupation  
NOT EMPLOYED

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	0	8

Transaction ID: C5049296A

Amount of Each Receipt this Period

10.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 156 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049296AB

Amount of Each Receipt this Period

10.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Elliott Greene

Mailing Address 723 Evergreen Parkway

City

Union

State

NJ

Zip Code

07083

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation

Software Developer

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5053658A

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053658AB

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

250.00

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

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

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

FOR LINE NUMBER: PAGE 157 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Allan Greenleaf

Mailing Address 116 Idlewood Road

City

Rochester

State

NY

Zip Code

14618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Rochester

Occupation  
Professor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: C5053665A

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053665AB

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

Tina M Herald

Mailing Address 2751 8 Mile Raod

City

Cincinnati

State

OH

Zip Code

45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
not employed

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5049285A

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

275.00

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

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

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

FOR LINE NUMBER: PAGE 158 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049285AB

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

M. Anne Jennings

Mailing Address 1515 Edith Street

City

Berkeley

State

CA

Zip Code

94703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: C5053663A

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053663AB

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

100.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

M. Anne Jennings

Mailing Address 1515 Edith Street

City

Berkeley

State

CA

Zip Code

94703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: C5053674A

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	0	8

Transaction ID: C5053674AB

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.**C.**

Full Name (Last, First, Middle Initial)

Charles Wood Jewett, Jr

Mailing Address 1616 SW Harbor Way  
Unit 408

City

Portland

State

OR

Zip Code

97201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Nevada

Occupation

Retired English Instructor

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1595.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	0	8

Transaction ID: C5049290A

Amount of Each Receipt this Period

45.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below

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

145.00

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

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

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

FOR LINE NUMBER: PAGE 160 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049290AB

Amount of Each Receipt this Period

45.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Kevin Warren Johnson

Mailing Address 607 Chillicothe Street  
The Loft

City

Portsmouth

State

OH

Zip Code

45662

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation

Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

790.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 8

Transaction ID: C5022568A

Amount of Each Receipt this Period

40.01

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 8

Transaction ID: C5022568AB

Amount of Each Receipt this Period

40.01

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

40.01

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Gordon Leach

Mailing Address 5549 Meryton PI

City

Cincinnati

State

OH

Zip Code

45224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Restaurateur

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	0	8

Transaction ID: C5005294A

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	0	8

Transaction ID: C5005294AB

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.**C.**

Full Name (Last, First, Middle Initial)

Gordon Leach

Mailing Address 5549 Meryton PI

City

Cincinnati

State

OH

Zip Code

45224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Restaurateur

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Transaction ID: C5053656A

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below**SUBTOTAL** of Receipts This Page (optional) .....

150.00

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

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

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

FOR LINE NUMBER: PAGE 162 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053656AB

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Matthew Livingston

Mailing Address P.O. Box 1203

City

Keams Canyon

State

AZ

Zip Code

86034

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Univ. of Arizona Cooperat-  
ive Extension

Occupation

Education

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 0 8

Transaction ID: C4990465A

Amount of Each Receipt this Period

20.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 8

Transaction ID: C4990465AB

Amount of Each Receipt this Period

20.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

20.00

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

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

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

FOR LINE NUMBER: PAGE 163 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Matthew Livingston

Mailing Address P.O. Box 1203

City

Keams Canyon

State

AZ

Zip Code

86034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univ. of Arizona Cooperat-  
ive Extension

Occupation

Education

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053688A

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053688AB

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

George Michael

Mailing Address 7814 Clearwater CT

City

Mason

State

OH

Zip Code

45040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

not employed

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053686A

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 164 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053686AB

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Donna Middlehurst

Mailing Address 310 Piliwale Rd.

City

Kula

State

HI

Zip Code

96790

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation

None

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: C5053659A

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5053659AB

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

50.00

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

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

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

FOR LINE NUMBER: PAGE 165 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

L. Susan Pace

Mailing Address 7193 Foxview Drive

City

Cincinnati

State

OH

Zip Code

45230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 3 / 2 0 0 8

Transaction ID: C5043062A

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 8

Transaction ID: C5043062AB

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

Susan P Parris

Mailing Address 102 San Salvador

City

Santa Fe

State

NM

Zip Code

87501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
G. Martin

Occupation

Personal assistant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.33

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 5 / 2 0 0 8

Transaction ID: C4942230A

Amount of Each Receipt this Period

20.08

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

25.08

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

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

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

FOR LINE NUMBER: PAGE 166 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 6 / 2 0 0 8

Transaction ID: C4942230AB

Amount of Each Receipt this Period

20.08

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Susan P Parris

Mailing Address 102 San Salvador

City

Santa Fe

State

NM

Zip Code

87501

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
G. Martin

Occupation

Personal assistant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.33

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 8

Transaction ID: C4999386A

Amount of Each Receipt this Period

20.08

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 8

Transaction ID: C4999386AB

Amount of Each Receipt this Period

20.08

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

20.08

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

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

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

FOR LINE NUMBER: PAGE 167 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Susan P Parris

Mailing Address 102 San Salvador

City

Santa Fe

State

NM

Zip Code

87501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
G. Martin

Occupation

Personal assistant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.33

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: C5027336A

Amount of Each Receipt this Period

20.08

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 8 / 2 0 0 8

Transaction ID: C5027336AB

Amount of Each Receipt this Period

20.08

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

Michael E. Pogue

Mailing Address 369 Sunny Acres Drive

City

Cincinnati

State

OH

Zip Code

45255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Princeton City Schools

Occupation

Teacher

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: C5049303A

Amount of Each Receipt this Period

10.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

30.08

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

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

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

FOR LINE NUMBER: PAGE 168 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049303AB

Amount of Each Receipt this Period

10.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Edyce Rau

Mailing Address 8681 Twilight Tear Lane

City

Cincinnati

State

OH

Zip Code

45249

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation

Homemaker

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049326A

Amount of Each Receipt this Period

15.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049326AB

Amount of Each Receipt this Period

15.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

15.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 364

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

William Schrode

Mailing Address 1984 East Loma Vista Drive

City	State	Zip Code
Tempe	AZ	85282

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	0	8

Transaction ID: C5005293A

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	MA	02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation  
Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	0	8

Transaction ID: C5005293AB

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.**C.**

Full Name (Last, First, Middle Initial)

William Schrode

Mailing Address 1984 East Loma Vista Drive

City	State	Zip Code
Tempe	AZ	85282

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	6	/	2	0	0	8

Transaction ID: C5049294A

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 170 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049294AB

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

William Schrode

Mailing Address 1984 East Loma Vista Drive

City

Tempe

State

AZ

Zip Code

85282

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053942A

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053942AB

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 171 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Claire Silberman

Mailing Address 70 Willow Street

City

Brooklyn

State

NY

Zip Code

11201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation

Not employed

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053943A

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053943AB

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

John G. Stuart

Mailing Address 438 Bouchelle Dr #205

City

New Smyrna Beach

State

FL

Zip Code

32169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation

n/a

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5049289A

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

275.00

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

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

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

FOR LINE NUMBER: PAGE 172 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 2 / 2 0 0 8

Transaction ID: C5049289AB

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**B.**

Full Name (Last, First, Middle Initial)

Stuart C. Wulsin

Mailing Address 8875 Spooky Ridge Lane

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Civic Enterprises

Occupation

Policy Analyst

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2346.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: C5022563A

Amount of Each Receipt this Period

1.01

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 8

Transaction ID: C5022563AB

Amount of Each Receipt this Period

1.01

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

1.01

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

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

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

FOR LINE NUMBER: PAGE 173 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Stuart C. Wulsin

Mailing Address 8875 Spooky Ridge Lane

City

Cincinnati

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Civic Enterprises

Occupation

Policy Analyst

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2346.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: C5043024A

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 5 / 2 0 0 8

Transaction ID: C5043024AB

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)

Jerry Sadlowski

Mailing Address PO Box 14907

City

Cleveland

State

OH

Zip Code

44114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Deloitte

Occupation

Management Consultant

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5054081A

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

505.00

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

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

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

FOR LINE NUMBER: PAGE 174 / 364

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Democracy Engine

Mailing Address 22 LOMA SERENA

City

SANTA FE

State

NM

Zip Code

87506

FEC ID number of contributing  
federal political committee.

**C** C00418970

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6235.09

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 0 8

Transaction ID: C5054081AB

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

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

0.00

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

189748.30

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

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

FOR LINE NUMBER: PAGE 175 / 364

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol St. SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C** C00000935

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: C5072684

Amount of Each Receipt this Period

3500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: Research mater-  
ials

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

3500.00

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

3500.00

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

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

FOR LINE NUMBER: PAGE 176 / 364

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

AFGE Political Action Committee

Mailing Address 80 F STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00009936

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4992177

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

American Postal Workers Union COPA

Mailing Address 1300 L St NW

City

Washington

State

DC

Zip Code

20005-4107

FEC ID number of contributing  
federal political committee.

**C** C00010322

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: C5027385

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Anderson Newtown Democratic Committee

Mailing Address 6610 Lyceum Ct

City

Cincinnati

State

OH

Zip Code

45230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: C4999899

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 177 / 364

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Asbestos Workers Political Committee

Mailing Address 9602 Martin Luther King Highway

City

Lanham

State

MD

Zip Code

20706

FEC ID number of contributing  
federal political committee.

**C** C00115527

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: C5014247

Amount of Each Receipt this Period

600.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ATU COPE

Mailing Address 5025 Wisconsin Ave NW

City

Washington

State

DC

Zip Code

20016-4121

FEC ID number of contributing  
federal political committee.

**C** C00032995

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: C4993008

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

CH2M HILL COMPANIES, LTD. PAC

Mailing Address 9191 S Jamaica St

City

Englewood

State

CO

Zip Code

80112-5946

FEC ID number of contributing  
federal political committee.

**C** C00143305

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: C5012091

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3100.00

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

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

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

FOR LINE NUMBER: PAGE 178 / 364

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Committee for a Livable Future

Mailing Address 830 NE Holladay Street  
Room 105

City State Zip Code  
Portland OR 97232

FEC ID number of contributing  
federal political committee.

**C** C00323352

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4990454

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Dave Wu For US Congress

Mailing Address 818 SW Third Ave. #1182

City State Zip Code  
Portland OR 97204

FEC ID number of contributing  
federal political committee.

**C** C00329292

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4989841

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATS RESHAPING AMERICA (DREAMPAC)

Mailing Address 1212 S. Victory Blvd.

City State Zip Code  
BURBANK CA 91502

FEC ID number of contributing  
federal political committee.

**C** C00423079

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C4988572

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 179 / 364

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

DRIVE Committee

Mailing Address 25 LOUISIANA AVENUE NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C70001979

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 8

Transaction ID: C4990848

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Federated Democratic Women of Scioto County

Mailing Address 17 S. Ziegler Ln

City

Stout

State

OH

Zip Code

45684

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: C4995260

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

FRIENDS OF CHARLIE WILSON

Mailing Address P.O. BOX 61

City

ST. CLAIRSVILLE

State

OH

Zip Code

43950

FEC ID number of contributing  
federal political committee.

**C** C00412015

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C4988979

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

6250.00

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

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

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

FOR LINE NUMBER: PAGE 180 / 364

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Hispanic Unity USA

Mailing Address 1212 S. Victory Blvd.

City

Burbank

State

CA

Zip Code

91502

FEC ID number of contributing  
federal political committee.

**C** C00345124

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051323

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Human Rights Campaign

Mailing Address 1640 Rhode Island Avenue NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00235853

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2114.17

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: C5072669

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: Web communicat-  
ions

**C.**

Full Name (Last, First, Middle Initial)

Human Rights Campaign

Mailing Address 1640 Rhode Island Avenue NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** C00235853

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2114.17

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: C5072671

Amount of Each Receipt this Period

393.65

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: Online fundrai-  
sing expenses

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

2418.65

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 / 364

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Human Rights Campaign

Mailing Address 1640 Rhode Island Avenue NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing  
federal political committee.**C** C00235853

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2114.17

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
0 6	/	2 6	/	2 0 0 8

Transaction ID: C5072673

Amount of Each Receipt this Period

1695.52

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)\* In-Kind: Website/email  
advocacy and list rentals**B.**

Full Name (Last, First, Middle Initial)

INTERNATIONAL BROTHERHOOD OF BOILERMAKERS CAMPAIGN

Mailing Address 753 State Ave.  
Suite 565

City	State	Zip Code
Kansas City	KS	66101

FEC ID number of contributing  
federal political committee.**C** C00005157

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
0 5	/	0 7	/	2 0 0 8

Transaction ID: C4991302

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

JJJ PAC

Mailing Address 1831 Bay St. S.E.

City	State	Zip Code
Washington	DC	20003-2510

FEC ID number of contributing  
federal political committee.**C** C00449413

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
0 5	/	0 1	/	2 0 0 8

Transaction ID: C4993692

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3695.52

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Kaptur For Congress

Mailing Address P.O. Box 899

City

Toledo

State

OH

Zip Code

43697

FEC ID number of contributing  
federal political committee.

**C** C00154625

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5053606

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Keep Kalb Mayor

Mailing Address 1133 Meadow Ln

City

Portsmouth

State

OH

Zip Code

45662-2527

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: C4991210

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

NASW PAC

Mailing Address 750 First Street, NW  
Suite 700

City

Washington

State

DC

Zip Code

20002-4241

FEC ID number of contributing  
federal political committee.

**C** C00060707

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 2 / 2 0 0 8

Transaction ID: C4989944

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2550.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

Mailing Address 1201 16th St NW Ste 420

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5049338

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Ob-Gyns for Women's Health PAC

Mailing Address PO Box 23498

City State Zip Code  
Washington DC 20026-3498

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5026541

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Penguin PAC

Mailing Address 80 F STREET NW SUITE 804

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00417584

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051370

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

9500.00

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

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

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

FOR LINE NUMBER: PAGE 184 / 364

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Physicians For A Democratic Majority

Mailing Address 3201 Mission St.

City

San Francisco

State

CA

Zip Code

94110

FEC ID number of contributing  
federal political committee.

**C** C00400093

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 8

Transaction ID: C5013108

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Quin-T Democrats

Mailing Address 1602 Locust St

City

Moscow

State

OH

Zip Code

45153-9784

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5051362

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Rangel for Congress

Mailing Address P.O. Box 5577

City

New York

State

NY

Zip Code

10027

FEC ID number of contributing  
federal political committee.

**C** C00302422

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5166031

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3250.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 / 364

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Robert C. Ondick Treasurer

Mailing Address 605 Main St.  
Ste. 301City State Zip Code  
Johnstown PA 15901FEC ID number of contributing  
federal political committee.**C** C00426023

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: C5026501

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

SEIU C.O.P.E

Mailing Address 1313 L Street NW

City State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee.**C** C00004036

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: C4993002

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Sierra Club Political Committee

Mailing Address 85 Second Street 2nd Flr.

City State Zip Code  
San Francisco CA 94105FEC ID number of contributing  
federal political committee.**C** C00135368

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: C5072679

Amount of Each Receipt this Period

10.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)\* In-Kind: Website endors-  
ement

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

10010.00

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

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

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

FOR LINE NUMBER: PAGE 186 / 364

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
STEPHANIE TUBBS JONES FOR US CONGRESS

Mailing Address 3729 SILSBY RD

City State Zip Code  
UNIVERSITY HEIGHTS OH 44118

FEC ID number of contributing  
federal political committee. **C** C00334151

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: C4991212

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Students for a New American Politics (SNAP) PAC

Mailing Address PO Box 206886

City State Zip Code  
New Haven CT 06520

FEC ID number of contributing  
federal political committee. **C** C00412122

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5170466

Amount of Each Receipt this Period

330.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* In-Kind: Stipend for fe-  
llow - O'Connor 2nd Qtr

**C.**

Full Name (Last, First, Middle Initial)  
The National Leadership PAC

Mailing Address PO Box 5577

City State Zip Code  
New York NY 10027

FEC ID number of contributing  
federal political committee. **C** C00302588

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5060955

Amount of Each Receipt this Period

3000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5330.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 364

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Tim Ryan for Congress

Mailing Address 1600 Roosevelt Avenue  
Suite 804City State Zip Code  
Niles OH 44446FEC ID number of contributing  
federal political committee.**C** C00373464

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C4938140

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

TRANSPORT WORKERS UNION Political Contributions Cm

Mailing Address 10 G Street, NE  
Suite 420City State Zip Code  
Washington DC 20002FEC ID number of contributing  
federal political committee.**C** C00008268

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5050129

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Treasury Employees Political Action Committee

Mailing Address 1750 H Street NW

City State Zip Code  
Washington DC 20006FEC ID number of contributing  
federal political committee.**C** C00107128

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: C5004854

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 364

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**Full Name (Last, First, Middle Initial)  
UNITE HERE TIP CAMPAIGN COMMITTEEMailing Address 275 7th Ave  
11th FloorCity State Zip Code  
New York NY 10001-6708FEC ID number of contributing  
federal political committee. **C** C00004861

Name of Employer

Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: C5050128

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**Full Name (Last, First, Middle Initial)  
United Mine Workers of America

Mailing Address 8315 LEE HIGHWAY FIFTH FLOOR

City State Zip Code  
FAIRFAX VA 22031FEC ID number of contributing  
federal political committee. **C** C00013342

Name of Employer

Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 8

Transaction ID: C4991477

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**Full Name (Last, First, Middle Initial)  
West Chester Democratic Women PAC

Mailing Address 7495 Joan Dr

City State Zip Code  
West Chester OH 45069FEC ID number of contributing  
federal political committee. **C**

Name of Employer

Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: C5000536

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3600.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 / 364

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**Full Name (Last, First, Middle Initial)  
Women's Action for New Directions PAC

Mailing Address 322 Fourth St. NE

City State Zip Code  
Washington DC 20002
FEC ID number of contributing  
federal political committee.**C** C00170316

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: C4989834

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**Full Name (Last, First, Middle Initial)  
America Works CommitteeMailing Address PO Box 76187  
Suite 800
City State Zip Code  
Washington DC 20013
FEC ID number of contributing  
federal political committee.**C** C00331694

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5060957

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below**C.**Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code  
Washington DC 20003
FEC ID number of contributing  
federal political committee.**C** C00000935Name of Employer  
Democratic Congressional  
CampaOccupation  
Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: C5060957B

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.

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

5500.00

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

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

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

FOR LINE NUMBER: PAGE 190 / 364

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
BARNEY FRANK FOR CONGRESS COMMITTEE

Mailing Address PO Box 260

City State Zip Code  
Newtonville MA 02460

FEC ID number of contributing  
federal political committee. **C** C00128868

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

Transaction ID: C5060958

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee. **C** C00000935

Name of Employer Occupation  
Democratic Congressional Campa Conduit total listed in Agg. field

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 8000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

Transaction ID: C5060958B

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Note: Above Contribution  
earmarked through this or-  
ganization.

**C.**

Full Name (Last, First, Middle Initial)  
SOLIS FOR CONGRESS

Mailing Address 6380 Wilshire Blvd. #1612

City State Zip Code  
Los Angeles CA 90048

FEC ID number of contributing  
federal political committee. **C** C00346296

Name of Employer Occupation

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

Transaction ID: C5072649A

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

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

3000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol St. SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.**C** C00000935Name of Employer  
Democratic Congressional  
Campa

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Occupation

Conduit total listed in Agg. field

Election Cycle-to-Date ▼

8000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: C5072649AB

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.

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

0.00

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

73204.17

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 / 364

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Victoria E Wulsin

Mailing Address 8875 Spooky Ridge Ln

City

Cincinnati

State

OH

Zip Code

45242-7350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOTENI Inc

Occupation

Physician

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

914.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	2	/	2	0	0	8

Transaction ID: C5043055A

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
\* Earmarked Contribution:  
See Below**B.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6754.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	8

Transaction ID: C5043055AB

Amount of Each Receipt this Period

5.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Note: Above Contribution  
earmarked through this or-  
ganization.

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

5.00

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

5.00

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

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

FOR LINE NUMBER: PAGE 193 / 364

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2491.65

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 8

Transaction ID: C5073061

Amount of Each Receipt this Period

24.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2491.65

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 5 / 2 0 0 8

Transaction ID: C5073064

Amount of Each Receipt this Period

10.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2491.65

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: C5073065

Amount of Each Receipt this Period

14.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

48.00

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

48.00

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

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

FOR LINE NUMBER: PAGE 194 / 364

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2491.65

Date of Receipt

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

Transaction ID: C5072767

Amount of Each Receipt this Period

107.08

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2491.65

Date of Receipt

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

Transaction ID: C5072768

Amount of Each Receipt this Period

142.96

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2491.65

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 8

Transaction ID: C5072769

Amount of Each Receipt this Period

225.19

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

475.23

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 364

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City

Cincinnati

State

OH

Zip Code

45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐

Primary

☒

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2491.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	8	

Transaction ID: C5168840

Amount of Each Receipt this Period

274.14

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

274.14

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

749.37

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 53852

City  
PhoenixState  
AZZip Code  
85072-3852Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241856

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	0	8

Amount of Each Disbursement this Period

573.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 53852

City  
PhoenixState  
AZZip Code  
85072-3852Purpose of Disbursement  
credit card processing fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241857

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	0	8

Amount of Each Disbursement this Period

323.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 53852

City  
PhoenixState  
AZZip Code  
85072-3852Purpose of Disbursement  
credit card processing fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241858

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	8

Amount of Each Disbursement this Period

94.27

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

991.12

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) April 9th Scholarship Fund	<b>Transaction ID:</b> D241914 <b>Date of Disbursement</b>
Mailing Address 700 South Eastgate Blvd Ste 430	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45245	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div> <div></div> <div>50.00</div> </div>
Donation	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc	<b>Transaction ID:</b> D243244 <b>Date of Disbursement</b>
Mailing Address PO Box 382110	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 0 / 2 0 0 8</div> </div>
City Boston State MA Zip Code 02283-2110	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement AB Credit card processing fee	<div> <div></div> <div>11.90</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc	<b>Transaction ID:</b> D243246 <b>Date of Disbursement</b>
Mailing Address PO Box 382110	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 0 8</div> </div>
City Boston State MA Zip Code 02283-2110	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement DE credit card processing fee	<div> <div></div> <div>4.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

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

**65.90**

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc Mailing Address PO Box 382110	<b>Transaction ID:</b> D243247 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 0 8</div> </div>
City State Zip Code Boston MA 02283-2110 Purpose of Disbursement AB credit card processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>2.22</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc Mailing Address PO Box 382110 City State Zip Code Boston MA 02283-2110 Purpose of Disbursement AB credit card processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243248 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>10.88</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc Mailing Address PO Box 382110 City State Zip Code Boston MA 02283-2110 Purpose of Disbursement DE credit card processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243249 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>1.00</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**14.10**

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

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc Mailing Address PO Box 382110	<b>Transaction ID:</b> D243250 <b>Date of Disbursement</b> <div> <div>05</div> <div>05</div> <div>2008</div> </div>
City State Zip Code Boston MA 02283-2110 Purpose of Disbursement AB credit card processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>1.45</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc Mailing Address PO Box 382110 City State Zip Code Boston MA 02283-2110 Purpose of Disbursement DE credit card processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243251 <b>Date of Disbursement</b> <div> <div>05</div> <div>05</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5.25</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc Mailing Address PO Box 382110 City State Zip Code Boston MA 02283-2110 Purpose of Disbursement AB credit card processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243252 <b>Date of Disbursement</b> <div> <div>05</div> <div>13</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>8.21</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

14.91

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

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Mailing Address PO Box 382110

City State Zip Code  
Boston MA 02283-2110

Purpose of Disbursement  
DE credit card processing fee  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
State: District: ☐ Other (specify) ▼

Transaction ID: D243256  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Mailing Address PO Box 382110

City State Zip Code  
Boston MA 02283-2110

Purpose of Disbursement  
credit card processing fee  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
State: District: ☐ Other (specify) ▼

Transaction ID: D243258  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Mailing Address PO Box 382110

City State Zip Code  
Boston MA 02283-2110

Purpose of Disbursement  
AB credit card processing fee  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
State: District: ☐ Other (specify) ▼

Transaction ID: D243259  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

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

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

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

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Mailing Address PO Box 382110

City State Zip Code  
Boston MA 02283-2110

Purpose of Disbursement  
AB credit card processing fee  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D243260  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Mailing Address PO Box 382110

City State Zip Code  
Boston MA 02283-2110

Purpose of Disbursement  
DE credit card processing fee  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D243261  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Mailing Address PO Box 382110

City State Zip Code  
Boston MA 02283-2110

Purpose of Disbursement  
DE credit card processing fee  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D243263  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

**82.83**

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

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

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

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc <hr/> Mailing Address PO Box 382110	<b>Transaction ID:</b> D243265 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 8</div> </div>
City Boston State MA Zip Code 02283-2110 <hr/> Purpose of Disbursement AB credit card processing fee Candidate Name <div>Category/Type</div> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2.16</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc <hr/> Mailing Address PO Box 382110 <hr/> City Boston State MA Zip Code 02283-2110 <hr/> Purpose of Disbursement DE credit card processing fee Candidate Name <div>Category/Type</div> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243266 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1.20</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc <hr/> Mailing Address PO Box 382110 <hr/> City Boston State MA Zip Code 02283-2110 <hr/> Purpose of Disbursement DE credit card processing fee Candidate Name <div>Category/Type</div> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243267 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 9 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1.04</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**4.40**

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Mailing Address PO Box 382110

City State Zip Code  
Boston MA 02283-2110

Purpose of Disbursement  
AB credit card processing fee  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D243269  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.44

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Mailing Address PO Box 382110

City State Zip Code  
Boston MA 02283-2110

Purpose of Disbursement  
AB credit card processing fee  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D243271  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

51.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Auburn Quad, Inc

Mailing Address PO Box 382110

City State Zip Code  
Boston MA 02283-2110

Purpose of Disbursement  
DE credit card processing fee  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D243273  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

91.87

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc <hr/> Mailing Address PO Box 382110	<b>Transaction ID:</b> D243274 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 8</div> </div>
City Boston State MA Zip Code 02283-2110 Purpose of Disbursement AB credit card processing fee Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>84.75</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc <hr/> Mailing Address PO Box 382110	<b>Transaction ID:</b> D243276 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 8</div> </div>
City Boston State MA Zip Code 02283-2110 Purpose of Disbursement DE credit card processing fee Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>142.11</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc <hr/> Mailing Address PO Box 382110	<b>Transaction ID:</b> D243277 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 8</div> </div>
City Boston State MA Zip Code 02283-2110 Purpose of Disbursement AB credit card processing fee Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>31.44</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**258.30**

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

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

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

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc Mailing Address PO Box 382110	<b>Transaction ID:</b> D243278 <b>Date of Disbursement</b> <div> <div>06</div> <div>30</div> <div>2008</div> </div>
City Boston State MA Zip Code 02283-2110 Purpose of Disbursement DE credit card processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>21.97</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Auburn Quad, Inc Mailing Address PO Box 382110 City Boston State MA Zip Code 02283-2110 Purpose of Disbursement AB credit card processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243682 <b>Date of Disbursement</b> <div> <div>06</div> <div>02</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1.59</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Batavia Township Mailing Address 1535 Clough Pike City Batavia State OH Zip Code 45103 Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D241917 <b>Date of Disbursement</b> <div> <div>04</div> <div>11</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>35.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**58.56**

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Bentonville Anti-Horse Thief Mailing Address 7785 State Rt. 41	<b>Transaction ID:</b> D241920 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div>
City State Zip Code Bentonville OH 45105 Purpose of Disbursement Event Expense- Annual Banquet Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>20.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Stacey Bhaerman Mailing Address 4 Arbor Circle #423 City State Zip Code Cincinnati OH 45255 Purpose of Disbursement Net Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D232022 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3867.50</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Stacey Bhaerman Mailing Address 4 Arbor Circle #423 City State Zip Code Cincinnati OH 45255 Purpose of Disbursement Repay expenses detailed in Qtr 1 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243168 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>116.45</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**4003.95**

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.** Full Name (Last, First, Middle Initial)  
Brown County Democratic Party

Mailing Address PO Box 596

City Felicity State OH Zip Code 45120

Purpose of Disbursement  
Media & Communication  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D241891

Date of Disbursement

05 / 27 / 2008

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
Brown County Democratic Party

Mailing Address PO Box 596

City Felicity State OH Zip Code 45120

Purpose of Disbursement  
Event Expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D241892

Date of Disbursement

06 / 11 / 2008

Amount of Each Disbursement this Period

40.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
Cincinnati AFL-CIO Labor Council

Mailing Address 1014 Vine Street  
Suite 2575

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D241882

Date of Disbursement

05 / 09 / 2008

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

320.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**Full Name (Last, First, Middle Initial)  
Cincinnati Income Tax Bureau

Mailing Address PO Box 634580

City Cincinnati State OH Zip Code 45263-4580

Purpose of Disbursement  
Cincinnati withholding tax  
Candidate NameCategory/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
State: District:

Transaction ID: D243669

Date of Disbursement

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

Amount of Each Disbursement this Period

220.48

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**Full Name (Last, First, Middle Initial)  
Cinti Interfaith Comm for Worker Justice

Mailing Address 215 East 14th St.

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event Expense  
Candidate NameCategory/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
State: District:

Transaction ID: D241912

Date of Disbursement

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

Amount of Each Disbursement this Period

40.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**Full Name (Last, First, Middle Initial)  
Clermont County Democratic Party

Mailing Address 10 N. Second Street

City Batavia State OH Zip Code 45103

Purpose of Disbursement  
Event Expense  
Candidate NameCategory/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
State: District:

Transaction ID: D241895

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

290.48

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.** Full Name (Last, First, Middle Initial)  
Clermont Philharmonic Orchestra

Mailing Address 1501 Cincinnati-Batavia Pike

City State Zip Code  
Batavia OH 45103

Purpose of Disbursement

Event Expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241915

Date of Disbursement

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

Amount of Each Disbursement this Period

10.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.** Full Name (Last, First, Middle Initial)  
Community Shares of Greater Cincinnati

Mailing Address 103 Wm Howard Taft Rd.

City State Zip Code  
Cincinnati OH 45219

Purpose of Disbursement

Event Expense- Guys, Griddles &amp; Grub 4/26/08

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241918

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	8

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.** Full Name (Last, First, Middle Initial)  
Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City State Zip Code  
Cincinnati OH 45208

Purpose of Disbursement

Net payroll

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D232006

Date of Disbursement

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

Amount of Each Disbursement this Period

1333.58

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

1378.58

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**

Full Name (Last, First, Middle Initial)

Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Mileage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242835

Date of Disbursement

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

Amount of Each Disbursement this Period

90.08

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**

Full Name (Last, First, Middle Initial)

Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Mileage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242836

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	9	/	2	0	0	8

Amount of Each Disbursement this Period

136.58

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**

Full Name (Last, First, Middle Initial)

Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Mileage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242840

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	9	/	2	0	0	8

Amount of Each Disbursement this Period

55.66

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

282.32

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.** Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Research materials

Candidate Name  
Democratic Congressional Campaign Committee

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242066

Date of Disbursement

06 / 09 / 2008

Amount of Each Disbursement this Period

3500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

\* In-Kind Received

**B.** Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241874

Date of Disbursement

05 / 02 / 2008

Amount of Each Disbursement this Period

464.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241875

Date of Disbursement

05 / 02 / 2008

Amount of Each Disbursement this Period

8.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

3973.29

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

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

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

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241876

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241877

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241878

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

**155.24**

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

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

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241879

Date of Disbursement

/   /

Amount of Each Disbursement this Period

209.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241880

Date of Disbursement

/   /

Amount of Each Disbursement this Period

126.47

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241881

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

369.28

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

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

Use separate schedule(s)  
for each category of the  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241843

Date of Disbursement

/   /

Amount of Each Disbursement this Period

878.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241845

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241846

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

964.20

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241847

Date of Disbursement

/   /

Amount of Each Disbursement this Period

73.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
First Data Merchant Services

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741-6600

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241848

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1.13

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Five Mile Investments LLC

Mailing Address 7162 Reading Road  
Suite 730

City Cincinnati State OH Zip Code 45237

Purpose of Disbursement  
Rent & Utilities

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241831

Date of Disbursement

/   /

Amount of Each Disbursement this Period

940.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

1015.08

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**Full Name (Last, First, Middle Initial)  
Five Mile Investments LLCMailing Address 7162 Reading Road  
Suite 730

City Cincinnati State OH Zip Code 45237

Purpose of Disbursement  
Rent & Utilities

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241834

Date of Disbursement

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

Amount of Each Disbursement this Period

940.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**Full Name (Last, First, Middle Initial)  
Five Mile Investments LLCMailing Address 7162 Reading Road  
Suite 730

City Cincinnati State OH Zip Code 45237

Purpose of Disbursement  
Rent & Utilities

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241836

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	2	/	2	0	0	8

Amount of Each Disbursement this Period

940.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**Full Name (Last, First, Middle Initial)  
Kevin C Franck

Mailing Address 240 M St SW

City Washington State DC Zip Code 20024-3659

Purpose of Disbursement  
Mileage & travel expenses

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242827

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Amount of Each Disbursement this Period

330.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

2210.50

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement

Mileage reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** D242828

Date of Disbursement

/   /

Amount of Each Disbursement this Period

87.71

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement

Mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** D242847

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.47

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement

Mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** D243681

Date of Disbursement

/   /

Amount of Each Disbursement this Period

17.78

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

120.96

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

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

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Repay expenses reported Qtr 1

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242845

Date of Disbursement

/   /

Amount of Each Disbursement this Period

48.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D243187

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.44

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Bryan Hoffman

Mailing Address 6105 S Clippinger Dr

City Cincinnati State OH Zip Code 45243-3228

Purpose of Disbursement  
Repay expenses reported Qtr 1

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D231670

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

774.57

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

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

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Human Rights Campaign	<b>Transaction ID:</b> D242055 <b>Date of Disbursement</b>
Mailing Address 1640 Rhode Island Avenue NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 0 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20036 Purpose of Disbursement Online fundraising expenses Candidate Name Human Rights Campaign	Amount of Each Disbursement this Period <div>393.65</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* In-Kind Received
<b>B.</b> Full Name (Last, First, Middle Initial) Human Rights Campaign	<b>Transaction ID:</b> D242059 <b>Date of Disbursement</b>
Mailing Address 1640 Rhode Island Avenue NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20036 Purpose of Disbursement Website/email advocacy and list rentals Candidate Name Human Rights Campaign	Amount of Each Disbursement this Period <div>1695.52</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* In-Kind Received
<b>C.</b> Full Name (Last, First, Middle Initial) Human Rights Campaign	<b>Transaction ID:</b> D242052 <b>Date of Disbursement</b>
Mailing Address 1640 Rhode Island Avenue NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 0 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20036 Purpose of Disbursement Web communications Candidate Name Human Rights Campaign	Amount of Each Disbursement this Period <div>25.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	* In-Kind Received

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

**2114.17**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Joshua S Levin

Mailing Address 1080 Nimitzview Dr  
Ste 400

City Cincinnati State OH Zip Code 45230-4332

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D232015

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4254.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

MacWilliams Kirchner Sanders & Prtnrs Inc.

Mailing Address 1660 L St NW  
Ste 301

City Washington State DC Zip Code 20036-5641

Purpose of Disbursement  
Media Consultants & OOP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D241862

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2555.53

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D232013

Date of Disbursement

/   /

Amount of Each Disbursement this Period

789.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

7599.17

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

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

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Margolis Mailing Address 1315 Delta Ave APT 1	<b>Transaction ID:</b> D242800 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45208 Purpose of Disbursement Mileage reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>13.30</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) David Margolis Mailing Address 1315 Delta Ave APT 1 City Cincinnati State OH Zip Code 45208 Purpose of Disbursement Mileage reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D242801 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>95.31</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) NGP Software Inc Mailing Address 1101 Vermont Ave NW Ste 710 City Washington State DC Zip Code 20005-3521 Purpose of Disbursement Reporting software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D241870 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1990.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**2098.61**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) NGP Software Inc</p> <p>Mailing Address 1101 Vermont Ave NW Ste 710</p> <p>City Washington State DC Zip Code 20005-3521</p> <p>Purpose of Disbursement Software- Financial &amp; Blasts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241871  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 6 / 2 0 0 8</div></p> <p><b>Amount of Each Disbursement this Period</b>  <div>150.00</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) NGP Software Inc</p> <p>Mailing Address 1101 Vermont Ave NW Ste 710</p> <p>City Washington State DC Zip Code 20005-3521</p> <p>Purpose of Disbursement Software fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241873  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 0 / 2 0 0 8</div></p> <p><b>Amount of Each Disbursement this Period</b>  <div>198.00</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Marcia R Oganowski</p> <p>Mailing Address 1614 Bitter Creek Lane</p> <p>City Batavia State OH Zip Code 45103</p> <p>Purpose of Disbursement Website design</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D232050  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 4 / 2 0 0 8</div></p> <p><b>Amount of Each Disbursement this Period</b>  <div>250.00</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**598.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.** Full Name (Last, First, Middle Initial)  
OH Department Job & Family Services

Mailing Address 222 East Central Parkway

City Cincinnati State OH Zip Code 45202-1225

Purpose of Disbursement  
State unemployment tax  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
State: District:

Transaction ID: D243243

Date of Disbursement

04 / 30 / 2008

Amount of Each Disbursement this Period

1217.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
Ohio Democratic Party

Mailing Address 340 East Fulton St.

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Donation

Candidate Name  
OHIO DEMOCRATIC PARTY

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
State: District:

Transaction ID: D241849

Date of Disbursement

04 / 04 / 2008

Amount of Each Disbursement this Period

10.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
Ohio Jewish Communities

Mailing Address 50 West Broad St.  
Ste 1815

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
State: District:

Transaction ID: D241933

Date of Disbursement

06 / 10 / 2008

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1327.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
Net Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D232020

Date of Disbursement

/   /

Amount of Each Disbursement this Period

399.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Sammy Pettinichi

Mailing Address 3800 Victory Pkwy  
ML 8185

City Cincinnati State OH Zip Code 45207

Purpose of Disbursement  
Mileage reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231964

Date of Disbursement

/   /

Amount of Each Disbursement this Period

17.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Pike Co Dem Central & Exec Comm

Mailing Address 25043 State Route 335

City Waverly State OH Zip Code 45690

Purpose of Disbursement  
Event Expense- 6/7/08 Golf Scramble Hole Sponser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241927

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

517.70

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Bank and Credit card fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241829

Date of Disbursement

06 / 02 / 2008

Amount of Each Disbursement this Period

8.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Bank fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243393

Date of Disbursement

04 / 01 / 2008

Amount of Each Disbursement this Period

10.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Bank & credit card fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243287

Date of Disbursement

04 / 01 / 2008

Amount of Each Disbursement this Period

15.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

33.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 201 East Fifth Street</p> <p>City Cincinnati State OH Zip Code 45202</p> <p>Purpose of Disbursement Bank &amp; credit card fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D243288</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>9.00</div> </div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Project GRAD</p> <p>Mailing Address 301 Oak St.</p> <p>City Cincinnati State OH Zip Code 45219</p> <p>Purpose of Disbursement Event Expense- Fundraiser @ Cinti State</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241922</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 7 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>75.00</div> </div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Project GRAD</p> <p>Mailing Address 301 Oak St.</p> <p>City Cincinnati State OH Zip Code 45219</p> <p>Purpose of Disbursement Event Expense- Fundraiser @ Cinti State</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241923</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 9 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div> <div></div> <div>75.00</div> </div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**159.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Seth B Rau

Mailing Address 8681 Twilight Tear Lane

City Cincinnati State OH Zip Code 45249

Purpose of Disbursement  
Mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242829

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

120.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Sierra Club Political Committee

Mailing Address 85 Second Street 2nd Flr.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Website endorsement

Candidate Name  
Sierra Club Political Committee

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242061

Date of Disbursement

06 / 03 / 2008

Amount of Each Disbursement this Period

10.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

\* In-Kind Received

**C.**

Full Name (Last, First, Middle Initial)  
Students for a New American Politics (SNAP) PAC

Mailing Address PO Box 206886

City New Haven State CT Zip Code 06520

Purpose of Disbursement  
Stipend for fellow - O'Connor 2nd Qtr

Candidate Name  
Students for a New American Politics (SNAP) PAC

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D258436

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

330.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

\* In-Kind Received

**SUBTOTAL** of Disbursements This Page (optional) .....

460.65

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)

Jens Sutmoller

Mailing Address 6981 Tradewind Court

City State Zip Code  
Maineville OH 45039

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243215

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

276.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Terris Barnes Walters

Mailing Address 400 Montgomery Street  
Ste 900

City State Zip Code  
San Francisco CA 94104

Purpose of Disbursement  
Direct Mail

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241886

Date of Disbursement

05 / 19 / 2008

Amount of Each Disbursement this Period

2816.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

The Maccabee Group

Mailing Address 3509 Connecticut Ave NW  
# 805

City State Zip Code  
Washington DC 20008-2400

Purpose of Disbursement  
Research consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241884

Date of Disbursement

05 / 19 / 2008

Amount of Each Disbursement this Period

11000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

14092.21

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Treasurer State of Ohio

Mailing Address 30 EAST BROAD STREET 9TH FLOOR

City Columbus State OH Zip Code 43266-0001

Purpose of Disbursement  
Ohio Withholding tax

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241893

Date of Disbursement

05 / 29 / 2008

Amount of Each Disbursement this Period

34.43

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Treasurer State of Ohio

Mailing Address 30 EAST BROAD STREET 9TH FLOOR

City Columbus State OH Zip Code 43266-0001

Purpose of Disbursement  
Ohio withholding tax

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243237

Date of Disbursement

04 / 18 / 2008

Amount of Each Disbursement this Period

1981.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Treasurer State of Ohio

Mailing Address 30 EAST BROAD STREET 9TH FLOOR

City Columbus State OH Zip Code 43266-0001

Purpose of Disbursement  
Ohio withholding tax

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243239

Date of Disbursement

05 / 15 / 2008

Amount of Each Disbursement this Period

1151.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

3166.88

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Treasurer State of Ohio	<b>Transaction ID:</b> D243241 <b>Date of Disbursement</b>
Mailing Address 30 EAST BROAD STREET 9TH FLOOR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 8</div> </div>
City Columbus State OH Zip Code 43266-0001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Ohio withholding tax	<div> <div>679.95</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) United Health Care	<b>Transaction ID:</b> D241930 <b>Date of Disbursement</b>
Mailing Address Dept CH 10151	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 4 / 2 0 0 8</div> </div>
City Palatine State IL Zip Code 60055-0151	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Health Insurance	<div> <div>265.74</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) United Health Care	<b>Transaction ID:</b> D241932 <b>Date of Disbursement</b>
Mailing Address Dept CH 10151	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 9 / 2 0 0 8</div> </div>
City Palatine State IL Zip Code 60055-0151	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Health Insurance	<div> <div>441.26</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**1386.95**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) United States Treasury <hr/> Mailing Address    Via EFTPS online payment <hr/> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Washington</td> <td style="width: 16%;">State DC</td> <td style="width: 51%;">Zip Code 20500</td> </tr> </table> <hr/> <table style="width: 100%;"> <tr> <td style="width: 50%;">Purpose of Disbursement Pay 941 tax due Qtr 1</td> <td style="width: 50%; text-align: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>         Category/ Type       </td> </tr> </table> <hr/> <table style="width: 100%;"> <tr> <td style="width: 30%;">Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width: 70%;">Disbursement For: 2008 <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State:                      District:	City Washington	State DC	Zip Code 20500	Purpose of Disbursement Pay 941 tax due Qtr 1	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D243218 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px; text-align: center;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">M</td><td style="width: 10%;">M</td><td style="width: 10%;">D</td><td style="width: 10%;">D</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td> </tr> <tr> <td>0</td><td>4</td><td>1</td><td>5</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 10px;">4135.74</div> <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	D	D	Y	Y	Y	Y	0	4	1	5	2	0	0	8
City Washington	State DC	Zip Code 20500																						
Purpose of Disbursement Pay 941 tax due Qtr 1	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> Category/ Type																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
M	M	D	D	Y	Y	Y	Y																	
0	4	1	5	2	0	0	8																	
<b>B.</b> Full Name (Last, First, Middle Initial) United States Treasury <hr/> Mailing Address    Via EFTPS online payment <hr/> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Washington</td> <td style="width: 16%;">State DC</td> <td style="width: 51%;">Zip Code 20500</td> </tr> </table> <hr/> <table style="width: 100%;"> <tr> <td style="width: 50%;">Purpose of Disbursement Pay 941 tax due Qtr 1</td> <td style="width: 50%; text-align: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>         Category/ Type       </td> </tr> </table> <hr/> <table style="width: 100%;"> <tr> <td style="width: 30%;">Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width: 70%;">Disbursement For: 2008 <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State:                      District:	City Washington	State DC	Zip Code 20500	Purpose of Disbursement Pay 941 tax due Qtr 1	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D243221 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px; text-align: center;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">M</td><td style="width: 10%;">M</td><td style="width: 10%;">D</td><td style="width: 10%;">D</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td> </tr> <tr> <td>0</td><td>4</td><td>1</td><td>5</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 10px;">1348.30</div> <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	D	D	Y	Y	Y	Y	0	4	1	5	2	0	0	8
City Washington	State DC	Zip Code 20500																						
Purpose of Disbursement Pay 941 tax due Qtr 1	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> Category/ Type																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
M	M	D	D	Y	Y	Y	Y																	
0	4	1	5	2	0	0	8																	
<b>C.</b> Full Name (Last, First, Middle Initial) United States Treasury <hr/> Mailing Address    Via EFTPS online payment <hr/> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Washington</td> <td style="width: 16%;">State DC</td> <td style="width: 51%;">Zip Code 20500</td> </tr> </table> <hr/> <table style="width: 100%;"> <tr> <td style="width: 50%;">Purpose of Disbursement Pay 941 tax due Qtr 1</td> <td style="width: 50%; text-align: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>         Category/ Type       </td> </tr> </table> <hr/> <table style="width: 100%;"> <tr> <td style="width: 30%;">Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td style="width: 70%;">Disbursement For: 2008 <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State:                      District:	City Washington	State DC	Zip Code 20500	Purpose of Disbursement Pay 941 tax due Qtr 1	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D243223 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px; text-align: center;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">M</td><td style="width: 10%;">M</td><td style="width: 10%;">D</td><td style="width: 10%;">D</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td><td style="width: 10%;">Y</td> </tr> <tr> <td>0</td><td>4</td><td>1</td><td>5</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </div> <hr/> <b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-top: 10px;">3478.74</div> <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	D	D	Y	Y	Y	Y	0	4	1	5	2	0	0	8
City Washington	State DC	Zip Code 20500																						
Purpose of Disbursement Pay 941 tax due Qtr 1	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> Category/ Type																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
M	M	D	D	Y	Y	Y	Y																	
0	4	1	5	2	0	0	8																	

SUBTOTAL of Disbursements This Page (optional) .....

8962.78

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
United States Treasury

Mailing Address Via EFTPS online payment

City State Zip Code  
Washington DC 20500

Purpose of Disbursement  
941 Tax

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243234

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4426.14

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
United States Treasury

Mailing Address Via EFTPS online payment

City State Zip Code  
Washington DC 20500

Purpose of Disbursement  
941 Tax

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243235

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5601.64

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
US Bank

Mailing Address 7137 Miami Ave

City State Zip Code  
Cincinnati OH 45243

Purpose of Disbursement  
Bank fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243392

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

10033.73

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Woman's City Club Mailing Address PO Box 19066	<b>Transaction ID:</b> D241894 <b>Date of Disbursement</b> <div> <div>06</div> <div>10</div> <div>2008</div> </div>
City Cincinnati State OH Zip Code 45219-0066 Purpose of Disbursement Event Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>45.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Woman's City Club Mailing Address PO Box 19066 City Cincinnati State OH Zip Code 45219-0066 Purpose of Disbursement Event Expense- 3/13/08 Natl Speaker Forum Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D241841 <b>Date of Disbursement</b> <div> <div>04</div> <div>02</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>70.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Zimcom Network Solutions Mailing Address 1080 Nimitzview Dr. Suite 400 City Cincinnati State OH Zip Code 45230 Purpose of Disbursement Telephone & Computer Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D241866 <b>Date of Disbursement</b> <div> <div>04</div> <div>25</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>330.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**445.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)  Zimcom Network Solutions</p> <p>Mailing Address 1080 Nimitzview Dr.  Suite 400</p> <p>City Cincinnati State OH Zip Code 45230</p> <p>Purpose of Disbursement  Telephone &amp; computer expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241867  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 5 / 2 2 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  330.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)  Zimmerman &amp; Co. CPAs Inc.</p> <p>Mailing Address 1080 Nimitzview Dr.  Suite 400</p> <p>City Cincinnati State OH Zip Code 45230</p> <p>Purpose of Disbursement  Consultant/Prof fees- Accounting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241864  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 4 / 2 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  3000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)  Cheryl Crowe</p> <p>Mailing Address 3545 Zumstein Ave</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement  Reimbursement - see below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D231680  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 4 / 0 2 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  75.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

3405.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Mileage reimbursement  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231677  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Volunteer expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231681  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Reimbursement - see below  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231683  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

46.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

46.10

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**

Full Name (Last, First, Middle Initial)

Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement

Mileage reimbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231684

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	0	8

Amount of Each Disbursement this Period

19.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Dollar Tree

Mailing Address 8562 Beechmont Road

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement

Fundraising expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231687

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	0	8

Amount of Each Disbursement this Period

19.91

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Gilligans

Mailing Address 2700 Madison Road

City Cincinnati State OH Zip Code 45212

Purpose of Disbursement

Fundraising expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231686

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	0	8

Amount of Each Disbursement this Period

6.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Daniel L. Ticotsky

Mailing Address 2328 Easthill Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Reimbursement - see below  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231847  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

163.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Costco Wholesale

Mailing Address 9691 Waterstone Blvd

City Cincinnati State OH Zip Code 45249

Purpose of Disbursement  
Fundraising expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231080  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

163.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Joshua S Levin

Mailing Address 1080 Nimitzview Dr  
Ste 400

City Cincinnati State OH Zip Code 45230-4332

Purpose of Disbursement  
Reimbursements - see below  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231848  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1377.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1540.30

**TOTAL** This Period (last page this line number only) .....

X	17		18		19a		19b
	20a		20b		20c		21

NAME OF COMMITTEE (In Full)  
Wulsin for Congress

FEC Schedule B ( Form 3 ) (Revised 02/2003)

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**

Full Name (Last, First, Middle Initial)

Joshua S Levin

Mailing Address 1080 Nimitzview Dr  
Ste 400

City Cincinnati State OH Zip Code 45230-4332

Purpose of Disbursement  
Administrative reimbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231101

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	0	8

Amount of Each Disbursement this Period

120.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

PNC Bank

Mailing Address 201 East Fifth Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Credit care pymt - see below

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	0	8

Amount of Each Disbursement this Period

4989.46

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**

Full Name (Last, First, Middle Initial)

Activate

Mailing Address 23A N King St

City Leesburg State VA Zip Code 20176-2819

Purpose of Disbursement  
Telephone dialing service

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231893

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	0	8

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

4989.46

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Activate Mailing Address 23A N King St	<b>Transaction ID:</b> D231894 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Leesburg State VA Zip Code 20176-2819 Purpose of Disbursement Telephone dialing service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Activate Mailing Address 23A N King St	<b>Transaction ID:</b> D231895 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Leesburg State VA Zip Code 20176-2819 Purpose of Disbursement Telephone dialing service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Activate Mailing Address 23A N King St	<b>Transaction ID:</b> D231896 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Leesburg State VA Zip Code 20176-2819 Purpose of Disbursement Telephone dialing service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>0.00</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Activate Mailing Address 23A N King St	<b>Transaction ID:</b> D231897 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Leesburg State VA Zip Code 20176-2819 Purpose of Disbursement Telephone dialing service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>250.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Activate Mailing Address 23A N King St City Leesburg State VA Zip Code 20176-2819 Purpose of Disbursement Telephone dialing service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D231898 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Activate Mailing Address 23A N King St City Leesburg State VA Zip Code 20176-2819 Purpose of Disbursement Telephone dialing service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D231900 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>0.00</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ►	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Activate

Mailing Address 23A N King St

City Leesburg State VA Zip Code 20176-2819

Purpose of Disbursement  
Telephone dialing service  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231901

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Activate

Mailing Address 23A N King St

City Leesburg State VA Zip Code 20176-2819

Purpose of Disbursement  
Telephone dialing service  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231902

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Arnold's Bar & Grill

Mailing Address 210 East 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231939

Date of Disbursement

/   /

Amount of Each Disbursement this Period

28.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Arnold's Bar & Grill

Mailing Address 210 East 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event Expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231940  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Arnold's Bar & Grill

Mailing Address 210 East 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231941  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Arnold's Bar & Grill

Mailing Address 210 East 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231942  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

93.78

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Arnold's Bar & Grill

Mailing Address 210 East 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231943  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

118.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Blue Wisp

Mailing Address 318 East 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Fundraising expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231910  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

65.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Blue Wisp

Mailing Address 318 East 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Fundraising expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231911  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

345.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
El Ranchito Restaurant

Mailing Address 7725 5 Mile Rd

City Cincinnati State OH Zip Code 45230-2355

Purpose of Disbursement  
Meals expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231937  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
FedEx

Mailing Address PO Box 371461

City Pittsburgh State PA Zip Code 15250-7461

Purpose of Disbursement  
Shipping expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231933  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.81

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Hank Cheetahs

Mailing Address 1375 East 9th Street

City Cleveland State OH Zip Code 44114

Purpose of Disbursement  
Meals expense  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: District:

Transaction ID: D231909  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

3.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D231908 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	Amount of Each Disbursement this Period
Purpose of Disbursement Event expense	<div> <div>402.44</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D231934 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	Amount of Each Disbursement this Period
Purpose of Disbursement Volunteer expense	<div> <div>11.78</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D231935 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	Amount of Each Disbursement this Period
Purpose of Disbursement Volunteer expense	<div> <div>24.08</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D231936

Date of Disbursement

/   /

Amount of Each Disbursement this Period

82.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Ramundo's Pizzeria

Mailing Address 3166 Linwood Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Meals expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D231938

Date of Disbursement

/   /

Amount of Each Disbursement this Period

67.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Shell Oil

Mailing Address 653 Ohio Pike

City Cincinnati State OH Zip Code 45245

Purpose of Disbursement  
Gasoline

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D231907

Date of Disbursement

/   /

Amount of Each Disbursement this Period

54.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 8666 Beechmont Ave</p> <p>City Cincinnati State OH Zip Code 45255-4710</p> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D231892  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>15.82</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53  <b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 201 East Fifth Street</p> <p>City Cincinnati State OH Zip Code 45202</p> <p>Purpose of Disbursement Credit card payment - see below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D231945  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>1320.81</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) 2nd Avenue Deli</p> <p>Mailing Address 132 East 33rd Street</p> <p>City New York State NY Zip Code 10016</p> <p>Purpose of Disbursement Meals expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D231955  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>15.44</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53  <b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>1320.81</div></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ► <div></div></p>	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)

2nd Avenue Deli

Mailing Address 132 East 33rd Street

City State Zip Code  
New York NY 10016

Purpose of Disbursement

Meals expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231956

Date of Disbursement

04 / 02 / 2008

Amount of Each Disbursement this Period

25.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Cappel's

Mailing Address 8315 Beechmont Ave

City State Zip Code  
Cincinnati OH 45255

Purpose of Disbursement

Event expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231960

Date of Disbursement

04 / 02 / 2008

Amount of Each Disbursement this Period

12.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Fountain Square Parking

Mailing Address 1 Fountain Square

City State Zip Code  
Cincinnati OH 45202

Purpose of Disbursement

Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231962

Date of Disbursement

04 / 02 / 2008

Amount of Each Disbursement this Period

1.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Green Leafs Mailing Address 190 Orchard St	<b>Transaction ID:</b> D231958 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City New York State NY Zip Code 10002-1432 Purpose of Disbursement Meals expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>15.52</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Group America Transportation Mailing Address 522 W 37th St City New York State NY Zip Code 10018-1103 Purpose of Disbursement Travel expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D231961 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>63.65</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Hancock Fabrics Mailing Address 454 Ohio Pike City Cincinnati State OH Zip Code 45255-3365 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D231959 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5.31</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
NYC Taxi

Mailing Address 228 E 32nd St

City State Zip Code  
New York NY 10016-6306

Purpose of Disbursement

Travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** D231954

Date of Disbursement

/   /

Amount of Each Disbursement this Period

36.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Parking Company of America

Mailing Address 618 Petersburg Rd

City State Zip Code  
Hebron KY 41048-9611

Purpose of Disbursement

Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** D231952

Date of Disbursement

/   /

Amount of Each Disbursement this Period

18.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Parking Company of America

Mailing Address 618 Petersburg Rd

City State Zip Code  
Hebron KY 41048-9611

Purpose of Disbursement

Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** D231953

Date of Disbursement

/   /

Amount of Each Disbursement this Period

13.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D231951 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	Amount of Each Disbursement this Period <div>278.76</div>
Purpose of Disbursement Office supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Target Department Store	<b>Transaction ID:</b> D231957 <b>Date of Disbursement</b>
Mailing Address 8680 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	Amount of Each Disbursement this Period <div>10.65</div>
Purpose of Disbursement Volunteer expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) TGI Friday's	<b>Transaction ID:</b> D231946 <b>Date of Disbursement</b>
Mailing Address 7500 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255	Amount of Each Disbursement this Period <div>24.62</div>
Purpose of Disbursement Meals expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
United States Post Office

Mailing Address 7737 Laurel AVE

City Cincinnati State OH Zip Code 45243

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231949

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
United States Post Office

Mailing Address 7737 Laurel AVE

City Cincinnati State OH Zip Code 45243

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231950

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
US Airways

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement  
Travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231947

Date of Disbursement

/   /

Amount of Each Disbursement this Period

383.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) US Airways	<b>Transaction ID:</b> D231948																				
Mailing Address	Date of Disbursement																				
4000 E Sky Harbor Blvd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	2		2	0	0	8												
City Phoenix	State AZ	Zip Code 85034-3802	Amount of Each Disbursement this Period																		
Purpose of Disbursement	<div style="border: 1px solid black; padding: 2px;"> Category/ Type </div>		<div style="border: 1px solid black; padding: 2px;"> 383.00 </div>																		
Travel expense			<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																		
Candidate Name	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>[MEMO ITEM]</b>																		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Stacey Bhaerman	<b>Transaction ID:</b> D231966																				
Mailing Address	Date of Disbursement																				
4 Arbor Circle #423	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	2		2	0	0	8												
City Cincinnati	State OH	Zip Code 45255	Amount of Each Disbursement this Period																		
Purpose of Disbursement	<div style="border: 1px solid black; padding: 2px;"> Category/ Type </div>		<div style="border: 1px solid black; padding: 2px;"> 876.20 </div>																		
Reimbursement - see below			<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																		
Candidate Name	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>[MEMO ITEM]</b>																		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Stacey Bhaerman	<b>Transaction ID:</b> D231967																				
Mailing Address	Date of Disbursement																				
4 Arbor Circle #423	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	2		2	0	0	8												
City Cincinnati	State OH	Zip Code 45255	Amount of Each Disbursement this Period																		
Purpose of Disbursement	<div style="border: 1px solid black; padding: 2px;"> Category/ Type </div>		<div style="border: 1px solid black; padding: 2px;"> 33.00 </div>																		
Mileage reimbursement			<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																		
Candidate Name	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>[MEMO ITEM]</b>																		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**876.20**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)

Ms. Stacey Bhaerman

Mailing Address 4 Arbor Circle #423

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement

Mileage reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231968

Date of Disbursement

/   /

Amount of Each Disbursement this Period

53.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Ms. Stacey Bhaerman

Mailing Address 4 Arbor Circle #423

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement

Cellular reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231969

Date of Disbursement

/   /

Amount of Each Disbursement this Period

90.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Ms. Stacey Bhaerman

Mailing Address 4 Arbor Circle #423

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement

Relocation reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231970

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. walter blair Mailing Address 3494 Forestoak Ct	<b>Transaction ID:</b> D231973 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45208 Purpose of Disbursement Reimbursement - see below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>137.13</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Staples Mailing Address 8666 Beechmont Ave City Cincinnati State OH Zip Code 45255-4710 Purpose of Disbursement Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D231974 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>137.13</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Victoria E Wulsin Mailing Address 8875 Spooky Ridge Ln City Cincinnati State OH Zip Code 45242-7350 Purpose of Disbursement Reimbursement - see below Candidate Name Victoria Wulsin Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 02	<b>Transaction ID:</b> D231977 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>82.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**219.13**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**Full Name (Last, First, Middle Initial)  
Yellow Cab of DC, Inc

Mailing Address 1636 Bladensburg Road

City Washington State DC Zip Code 20002

Purpose of Disbursement

Travel expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D231978

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	0	8

Amount of Each Disbursement this Period

82.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 201 East Fifth Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement

Credit card payment-see below

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241961

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	0	8

Amount of Each Disbursement this Period

1729.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**Full Name (Last, First, Middle Initial)  
Anderson Area Chamber of Commerce

Mailing Address 8072B Beechmont Avenue

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement

Event Expense- Citizen of Yr

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D241995

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	0	8

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

1729.38

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Central Parking</p> <p>Mailing Address Vine Street</p> <p>City Cincinnati State OH Zip Code 45202</p> <p>Purpose of Disbursement Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241984</p> <p>Date of Disbursement  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>0 4 / 0 2 / 2 0 0 8</div> </p> <p>Amount of Each Disbursement this Period  <div>5.00</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Emmitt House</p> <p>Mailing Address 123 N. Market</p> <p>City Waverly State OH Zip Code 45690</p> <p>Purpose of Disbursement Meals and Entertainment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D241993</p> <p>Date of Disbursement  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>0 4 / 1 0 / 2 0 0 8</div> </p> <p>Amount of Each Disbursement this Period  <div>27.52</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Human Rights Campaign</p> <p>Mailing Address 1640 Rhode Island Avenue NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Donations</p> <p>Candidate Name Human Rights Campaign</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242001</p> <p>Date of Disbursement  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>0 4 / 2 1 / 2 0 0 8</div> </p> <p>Amount of Each Disbursement this Period  <div>1200.00</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>0.00</div></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D241972 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	Amount of Each Disbursement this Period <div>75.37</div>
Purpose of Disbursement Volunteer soda	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<div>[MEMO ITEM]</div>	
<b>B.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D241981 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	Amount of Each Disbursement this Period <div>26.52</div>
Purpose of Disbursement Volunteer snacks and pop	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<div>[MEMO ITEM]</div>	
<b>C.</b> Full Name (Last, First, Middle Initial) Office Max	<b>Transaction ID:</b> D241988 <b>Date of Disbursement</b>
Mailing Address 4540 Eastgate Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 4 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45245	Amount of Each Disbursement this Period <div>42.58</div>
Purpose of Disbursement Event Costs -DC event	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<div>[MEMO ITEM]</div>	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 8666 Beechmont Ave</p> <p>City Cincinnati State OH Zip Code 45255-4710</p> <p>Purpose of Disbursement Event costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D241990</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 4</div> <div>0 9</div> <div>2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>16.60</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 8666 Beechmont Ave</p> <p>City Cincinnati State OH Zip Code 45255-4710</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D241998</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 4</div> <div>1 0</div> <div>2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>175.70</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 7737 Laurel AVE</p> <p>City Cincinnati State OH Zip Code 45243</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D242000</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 4</div> <div>1 4</div> <div>2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>130.09</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>0.00</div></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ► <div></div></p>	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 201 East Fifth Street</p> <p>City Cincinnati State OH Zip Code 45202</p> <p>Purpose of Disbursement Credit Card payment adj'd</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242024</p> <p>Date of Disbursement  M M / D D / Y Y Y Y  0 6 / 0 6 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  7280.41</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Airtran Airways</p> <p>Mailing Address 9955 Airtran Blvd</p> <p>City Orlando State FL Zip Code 32827-5330</p> <p>Purpose of Disbursement Travel- DC Fundraiser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242092</p> <p>Date of Disbursement  M M / D D / Y Y Y Y  0 4 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  273.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Airtran Airways</p> <p>Mailing Address 9955 Airtran Blvd</p> <p>City Orlando State FL Zip Code 32827-5330</p> <p>Purpose of Disbursement Travel- DC fundraiser</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242093</p> <p>Date of Disbursement  M M / D D / Y Y Y Y  0 4 / 2 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  62.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

7280.41

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Airtran Airways Mailing Address 9955 Airtran Blvd	<b>Transaction ID:</b> D242269 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 0 / 2 0 0 8</div> </div>
City Orlando State FL Zip Code 32827-5330 Purpose of Disbursement Travel- DC to day event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>399.00</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Amtrak Mailing Address Penn Station City New York State NY Zip Code 10001 Purpose of Disbursement Transportation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D242720 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>58.00</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Bethesda Care Mailing Address 6200 Pfeiffer Rd. City Cincinnati State OH Zip Code 45236 Purpose of Disbursement Retreat Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D242050 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>20.00</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Biggs</p> <p>Mailing Address 9600 S Mason Montgomery Rd, Mason,</p> <p>City Mason State OH Zip Code 45040</p> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242729</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 5</div> <div>1 8</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>11.16</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Budget Rent A Car</p> <p>Mailing Address 3600 Terminal Rd</p> <p>City Vandalia State OH Zip Code 45377-3312</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242528</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 4</div> <div>2 8</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>128.57</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Cafe Blossom</p> <p>Mailing Address 466 Columbus Avenue</p> <p>City New York State NY Zip Code 10024</p> <p>Purpose of Disbursement Catering for event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242735</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 5</div> <div>1 9</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>4200.00</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>0.00</div></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Cafe Briosio

Mailing Address 14 E Gay St # 1

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
travel meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242507

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Central Parking

Mailing Address Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Airport parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242722

Date of Disbursement

/   /

Amount of Each Disbursement this Period

27.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Chinatown Buffet

Mailing Address 1015 State Route 28

City Milford State OH Zip Code 45150

Purpose of Disbursement  
Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242038

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CVS Pharmacy</p> <p>Mailing Address 5229 Montgomery Road</p> <p>City Cincinnati State OH Zip Code 45212</p> <p>Purpose of Disbursement Office expense- pop</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D242030</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 4</div> <div>2 3</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>19.11</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CVS Pharmacy</p> <p>Mailing Address 5229 Montgomery Road</p> <p>City Cincinnati State OH Zip Code 45212</p> <p>Purpose of Disbursement Office Expense- pop</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D242031</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 4</div> <div>2 3</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>6.87</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CVS Pharmacy</p> <p>Mailing Address 5229 Montgomery Road</p> <p>City Cincinnati State OH Zip Code 45212</p> <p>Purpose of Disbursement Office Expense- pop</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D242032</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 5</div> <div>1 3</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>11.72</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Delta Airlines

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242731

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	0	8

Amount of Each Disbursement this Period

212.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Delta Airlines

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242732

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	0	8

Amount of Each Disbursement this Period

212.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Delta Airlines

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242733

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	0	8

Amount of Each Disbursement this Period

169.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address 1030 Delta Blvd</p> <p>City Atlanta State GA Zip Code 30354-1989</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242734</p> <p>Date of Disbursement  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 5</div> <div>1 9</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>169.50</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Exxon Mobil</p> <p>Mailing Address Gas Stations</p> <p>City Cincinnati State OH Zip Code 45230</p> <p>Purpose of Disbursement gas for campaign travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242515</p> <p>Date of Disbursement  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 4</div> <div>2 6</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>21.00</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) HMS Host Restaurants</p> <p>Mailing Address Various airports</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Travel: meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242747</p> <p>Date of Disbursement  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 5</div> <div>2 2</div> <div>2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period  <div>26.57</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>0.00</div></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ► <div></div></p>	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Volunteer Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242054

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Volunteer snacks and pop

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242063

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Volunteer pop

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242065

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D242060 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Volunteer expense- snacks & soda	<div> <div>11.78</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D242068 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 8 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office supplies	<div> <div>6.37</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D242069 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Volunteer snacks	<div> <div>20.21</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Kroger Mailing Address 7580 Beechmont Ave	<b>Transaction ID:</b> D242071 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221 Purpose of Disbursement Volunteer snacks Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>12.29</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Ohio Democratic Party Mailing Address 340 East Fulton St.	<b>Transaction ID:</b> D242725 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 8</div> </div>
City Columbus State OH Zip Code 43215 Purpose of Disbursement Campaign dinner event Candidate Name OHIO DEMOCRATIC PARTY Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>40.00</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Ohio Democratic Party Mailing Address 340 East Fulton St.	<b>Transaction ID:</b> D242726 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 7 / 2 0 0 8</div> </div>
City Columbus State OH Zip Code 43215 Purpose of Disbursement Women's Caucus Dinner Candidate Name OHIO DEMOCRATIC PARTY Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>600.00</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Panera Bread

Mailing Address 7875 Montgomery Rd

City Cincinnati State OH Zip Code 45236

Purpose of Disbursement  
Meeting meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242028

Date of Disbursement

04 / 21 / 2008

Amount of Each Disbursement this Period

41.53

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
PQ Lincoln Center

Mailing Address Lincoln Center

City New York State NY Zip Code 10001

Purpose of Disbursement  
Travel meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242736

Date of Disbursement

05 / 20 / 2008

Amount of Each Disbursement this Period

42.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Ruby Tuesdays Restaurants

Mailing Address 315 Rivers Edge Drive

City Milford State OH Zip Code 45150

Purpose of Disbursement  
Technology meeting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242728

Date of Disbursement

05 / 08 / 2008

Amount of Each Disbursement this Period

43.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Safeway Mailing Address 415 14th St SE	<b>Transaction ID:</b> D242536 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 9 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003-3002 Purpose of Disbursement Food for event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>8.33</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Speedway Mailing Address PO Box 1500	<b>Transaction ID:</b> D242723 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 8</div> </div>
City Springfield State OH Zip Code 45501-1500 Purpose of Disbursement Travel: soft drink Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>2.58</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Speedway Mailing Address PO Box 1500	<b>Transaction ID:</b> D242724 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 8</div> </div>
City Springfield State OH Zip Code 45501-1500 Purpose of Disbursement Gasoline for campaign travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>63.17</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ►	
<b>TOTAL</b> This Period (last page this line number only) ..... ►	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242516 <b>Date of Disbursement</b>																				
Mailing Address 8666 Beechmont Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	7		2	0	0	8												
City Cincinnati State OH Zip Code 45255-4710	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Event costs; nametags etc	<table border="1"> <tr> <td>92.63</td> </tr> </table>	92.63																			
92.63																					
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/ Type <b>[MEMO ITEM]</b>																				
<b>B.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242517 <b>Date of Disbursement</b>																				
Mailing Address 8666 Beechmont Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	0	8												
City Cincinnati State OH Zip Code 45255-4710	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement portfolios/supplies	<table border="1"> <tr> <td>9.14</td> </tr> </table>	9.14																			
9.14																					
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/ Type <b>[MEMO ITEM]</b>																				
<b>C.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242518 <b>Date of Disbursement</b>																				
Mailing Address 8666 Beechmont Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	0	8												
City Cincinnati State OH Zip Code 45255-4710	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement pens & supplies	<table border="1"> <tr> <td>43.65</td> </tr> </table>	43.65																			
43.65																					
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/ Type <b>[MEMO ITEM]</b>																				

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Supershuttle DC

Mailing Address 2605 S Clark St

City State Zip Code  
Arlington VA 22202-4035

Purpose of Disbursement  
DC transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242510

Date of Disbursement

/   /

Amount of Each Disbursement this Period

41.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
The Green Turtle

Mailing Address BWI Airport  
1000 Friendship St., Terminal

City State Zip Code  
Baltimore MD 21240

Purpose of Disbursement  
Travel: meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242727

Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
United States Post Office

Mailing Address 7737 Laurel AVE

City State Zip Code  
Cincinnati OH 45243

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242530

Date of Disbursement

/   /

Amount of Each Disbursement this Period

82.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
United States Post Office

Mailing Address 7737 Laurel AVE

City Cincinnati State OH Zip Code 45243

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242531

Date of Disbursement

05 / 15 / 2008

Amount of Each Disbursement this Period

6.58

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
University of Cincinnati

Mailing Address 1401 E McMillan St

City Cincinnati State OH Zip Code 45206-2224

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242529

Date of Disbursement

04 / 28 / 2008

Amount of Each Disbursement this Period

4.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 201 East Fifth Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Credit Card payment adj'd

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242026

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

3391.03

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

3391.03

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Academy of Medicine

Mailing Address 320 Broadway St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242765

Date of Disbursement

/   /

Amount of Each Disbursement this Period

45.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Activate

Mailing Address 23A N King St

City Leesburg State VA Zip Code 20176-2819

Purpose of Disbursement  
Predictive dialer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242744

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Activate

Mailing Address 23A N King St

City Leesburg State VA Zip Code 20176-2819

Purpose of Disbursement  
Predictive dialer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242745

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**Full Name (Last, First, Middle Initial)  
Activate

Mailing Address 23A N King St

City Leesburg State VA Zip Code 20176-2819

Purpose of Disbursement  
Predictive dialer

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242746

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**Full Name (Last, First, Middle Initial)  
Airtran Airways

Mailing Address 9955 Airtran Blvd

City Orlando State FL Zip Code 32827-5330

Purpose of Disbursement  
Travel- DC day event

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242271

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

Amount of Each Disbursement this Period

395.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**Full Name (Last, First, Middle Initial)  
Arnold's Bar & Grill

Mailing Address 210 East 8th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Meeting meal

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242764

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	8

Amount of Each Disbursement this Period

18.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Bagel Stop

Mailing Address 580 Walnut St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Campaign meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242762

Date of Disbursement

06 / 12 / 2008

Amount of Each Disbursement this Period

2.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Bagel Stop

Mailing Address 580 Walnut St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Campaign meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242763

Date of Disbursement

06 / 17 / 2008

Amount of Each Disbursement this Period

1.49

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Biggs

Mailing Address 9600 S Mason Montgomery Rd, Mason,

City Mason State OH Zip Code 45040

Purpose of Disbursement  
Parade candy

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242730

Date of Disbursement

05 / 26 / 2008

Amount of Each Disbursement this Period

6.27

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Binkley Toys Inc.

Mailing Address 130 Church St  
Ste 398

City State Zip Code  
New York NY 10007-2226

Purpose of Disbursement  
Temporary Tattoos

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242756

Date of Disbursement

/   /

Amount of Each Disbursement this Period

102.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Buy.com

Mailing Address 1 Technology Dr

City State Zip Code  
Swedesboro NJ 08085

Purpose of Disbursement  
Office supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242748

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Cincinnati Sub Company

Mailing Address 5895 Pfeiffer Rd

City State Zip Code  
Cincinnati OH 45242-4819

Purpose of Disbursement  
Volunteer food

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242754

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) CVS Pharmacy	<b>Transaction ID:</b> D242036 <b>Date of Disbursement</b>
Mailing Address 5229 Montgomery Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45212	Amount of Each Disbursement this Period
Purpose of Disbursement Office Expense- pop	<div> <div>19.45</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) El Ranchito Restaurant	<b>Transaction ID:</b> D242749 <b>Date of Disbursement</b>
Mailing Address 7725 5 Mile Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 3 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45230-2355	Amount of Each Disbursement this Period
Purpose of Disbursement Meeting meal	<div> <div>16.73</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Grainger	<b>Transaction ID:</b> D242759 <b>Date of Disbursement</b>
Mailing Address 4420 Glendale Milford Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 0 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45242-3708	Amount of Each Disbursement this Period
Purpose of Disbursement Surge protectors	<div> <div>145.69</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Human Rights Campaign

Mailing Address 1640 Rhode Island Avenue NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Event fee

Candidate Name  
Human Rights Campaign

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242757

Date of Disbursement

06 / 02 / 2008

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Volunteer snacks

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242074

Date of Disbursement

05 / 23 / 2008

Amount of Each Disbursement this Period

50.47

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Volunteer expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242077

Date of Disbursement

05 / 28 / 2008

Amount of Each Disbursement this Period

9.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D242078 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 5 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Event expense- parade candy	<div> <div>Category/ Type</div> <div>5.48</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D242080 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 8 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Volunteer snacks	<div> <div>Category/ Type</div> <div>19.36</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Kroger	<b>Transaction ID:</b> D242082 <b>Date of Disbursement</b>
Mailing Address 7580 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 3 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4221	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Volunteer snacks	<div> <div>Category/ Type</div> <div>14.98</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Office supplies

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242084

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Amount of Each Disbursement this Period

6.38									
------	--	--	--	--	--	--	--	--	--

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Volunteer snacks

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242085

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	0	8

Amount of Each Disbursement this Period

19.48									
-------	--	--	--	--	--	--	--	--	--

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**Full Name (Last, First, Middle Initial)  
Maggiano's Little Italy

Mailing Address 7875 Montgomery Road

City Cincinnati State OH Zip Code 45236

Purpose of Disbursement  
Meal meeting

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242750

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	0	8

Amount of Each Disbursement this Period

73.10									
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☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Marathon Gas Stations</p> <p>Mailing Address 9751 S Mason Montgomery Rd</p> <p>City Mason State OH Zip Code 45040</p> <p>Purpose of Disbursement Gas for campaign travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D242758</p> <p>Date of Disbursement 06 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 23.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) NY Times Sales</p> <p>Mailing Address 122 5th Avenue</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D242751</p> <p>Date of Disbursement 05 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 25.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) NY Times Sales</p> <p>Mailing Address 122 5th Avenue</p> <p>City New York State NY Zip Code 10011</p> <p>Purpose of Disbursement Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D242752</p> <p>Date of Disbursement 06 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 25.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
NYC Taxi

Mailing Address 228 E 32nd St

City State Zip Code  
New York NY 10016-6306

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242739

Date of Disbursement

/   /

Amount of Each Disbursement this Period

48.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 201 East Fifth Street

City State Zip Code  
Cincinnati OH 45202

Purpose of Disbursement  
Bank fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242760

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
PNC Bank

Mailing Address 201 East Fifth Street

City State Zip Code  
Cincinnati OH 45202

Purpose of Disbursement  
Bank fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242761

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242519 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	<b>Amount of Each Disbursement this Period</b> <div>108.60</div>
Purpose of Disbursement Toner, envelopes supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242520 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 7 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	<b>Amount of Each Disbursement this Period</b> <div>106.35</div>
Purpose of Disbursement Paper, pens, supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242521 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 7 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	<b>Amount of Each Disbursement this Period</b> <div>335.70</div>
Purpose of Disbursement Event & Office supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>0.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242522 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	Amount of Each Disbursement this Period
Purpose of Disbursement Pens, etc	<div> <div></div> <div>16.80</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242523 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 9 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	Amount of Each Disbursement this Period
Purpose of Disbursement Paper	<div> <div></div> <div>25.87</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242524 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 0 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	Amount of Each Disbursement this Period
Purpose of Disbursement Printer toner	<div> <div></div> <div>47.92</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
State: District:	
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ►	<div> <div></div> <div>0.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only) ..... ►	<div> <div></div> <div></div> </div>

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242525 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 1 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office supplies Candidate Name	<div> <div>57.49</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242526 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 7 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Paper & pens Candidate Name	<div> <div>10.11</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D242527 <b>Date of Disbursement</b>
Mailing Address 8666 Beechmont Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 7 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255-4710	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printer toner Candidate Name	<div> <div>74.54</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Supershuttle DC

Mailing Address 2605 S Clark St

City State Zip Code  
Arlington VA 22202-4035

Purpose of Disbursement  
transportation  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D242513  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
United States Post Office

Mailing Address 7737 Laurel AVE

City State Zip Code  
Cincinnati OH 45243

Purpose of Disbursement  
Postage  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D242532  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

420.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
United States Post Office

Mailing Address 7737 Laurel AVE

City State Zip Code  
Cincinnati OH 45243

Purpose of Disbursement  
Postage  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D242534  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

42.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Walgreens

Mailing Address 4605 Montgomery Rd

City Cincinnati State OH Zip Code 45212

Purpose of Disbursement  
Parade treats

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242753

Date of Disbursement

05 / 26 / 2008

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Victoria E Wulsin

Mailing Address 8875 Spooky Ridge Ln

City Cincinnati State OH Zip Code 45242-7350

Purpose of Disbursement  
Reimbursements - see below

Candidate Name  
Victoria Wulsin

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 02

Transaction ID: D242770

Date of Disbursement

04 / 16 / 2008

Amount of Each Disbursement this Period

711.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Central Parking

Mailing Address Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D234666

Date of Disbursement

04 / 16 / 2008

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

711.36

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Central Parking</p> <p>Mailing Address Vine Street</p> <p>City Cincinnati State OH Zip Code 45202</p> <p>Purpose of Disbursement Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D234667  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>3.00</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53  <b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) McDonald's Restaurants</p> <p>Mailing Address 1000 S 2nd St</p> <p>City Ripley State OH Zip Code 45167-1406</p> <p>Purpose of Disbursement Event meal while traveling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D234668  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>7.45</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53  <b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) T-Mobile</p> <p>Mailing Address PO Box 37380</p> <p>City Albuquerque, State NM Zip Code 87176</p> <p>Purpose of Disbursement Cell phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D234671  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>129.00</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53  <b>[MEMO ITEM]</b></p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► <div>0.00</div></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ► <div></div></p>	

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) T-Mobile Mailing Address PO Box 37380	<b>Transaction ID:</b> D234673 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div>
City Albuquerque, State NM Zip Code 87176 Purpose of Disbursement cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>129.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) T-Mobile Mailing Address PO Box 37380 City Albuquerque, State NM Zip Code 87176 Purpose of Disbursement cell phones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D234674 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>129.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Victoria E Wulsin Mailing Address 8875 Spooky Ridge Ln City Cincinnati State OH Zip Code 45242-7350 Purpose of Disbursement Primary mileage Candidate Name Victoria Wulsin Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 02	<b>Transaction ID:</b> D234661 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>308.91</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div>0.00</div> <div></div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div></div>

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Victoria E Wulsin

Mailing Address 8875 Spooky Ridge Ln

City Cincinnati State OH Zip Code 45242-7350

Purpose of Disbursement  
Reimbursement - see below

Candidate Name  
Victoria Wulsin

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 02

**Transaction ID:** D242771

Date of Disbursement

/   /

Amount of Each Disbursement this Period

90.55

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Molly Malone Irish Pub

Mailing Address 6111 Montgomery Rd

City Cincinnati State OH Zip Code 45213

Purpose of Disbursement  
campaign meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D234148

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Starbucks

Mailing Address 5218 Beechmont Ave

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
campaign meeting meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D234152

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

90.55

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**Full Name (Last, First, Middle Initial)  
United States Post Office

Mailing Address 7737 Laurel AVE

City Cincinnati State OH Zip Code 45243

Purpose of Disbursement  
postage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D234149

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	8

Amount of Each Disbursement this Period

11.88

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**Full Name (Last, First, Middle Initial)  
University of Cincinnati

Mailing Address 1401 E McMillan St

City Cincinnati State OH Zip Code 45206-2224

Purpose of Disbursement  
parking

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D234150

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	8

Amount of Each Disbursement this Period

7.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**Full Name (Last, First, Middle Initial)  
Wal-Mart Store

Mailing Address 9365 Fields Ertel Road

City Cincinnati State OH Zip Code 45249

Purpose of Disbursement  
supplies for event

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D234151

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	8

Amount of Each Disbursement this Period

54.55

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Victoria E Wulsin Mailing Address 8875 Spooky Ridge Ln	<b>Transaction ID:</b> D242772 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45242-7350 Purpose of Disbursement Reimbursement - see below Candidate Name Victoria Wulsin Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 02	<b>Amount of Each Disbursement this Period</b> <div>177.08</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Central Parking Mailing Address Vine Street City Cincinnati State OH Zip Code 45202 Purpose of Disbursement Parking Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D234664 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) IHOP Mailing Address 7862 Montgomery Rd City Cincinnati State OH Zip Code 45236 Purpose of Disbursement Meeting meal Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D234670 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>47.36</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

177.08

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Victoria E Wulsin

Mailing Address 8875 Spooky Ridge Ln

City Cincinnati State OH Zip Code 45242-7350

Purpose of Disbursement  
Mileage reimbursement

Candidate Name  
Victoria Wulsin

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 02

Transaction ID: D234662

Date of Disbursement

04 / 16 / 2008

Amount of Each Disbursement this Period

120.47

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Walgreens

Mailing Address 4605 Montgomery Rd

City Cincinnati State OH Zip Code 45212

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D234665

Date of Disbursement

04 / 16 / 2008

Amount of Each Disbursement this Period

4.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Victoria E Wulsin

Mailing Address 8875 Spooky Ridge Ln

City Cincinnati State OH Zip Code 45242-7350

Purpose of Disbursement  
Reimbursement - see detail below

Candidate Name  
Victoria Wulsin

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 02

Transaction ID: D242773

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

2032.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

2032.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Airtran Airways

Mailing Address 9955 Airtran Blvd

City Orlando State FL Zip Code 32827-5330

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: D242797

Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

123.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Bella Maria Cafe

Mailing Address 489 5th Ave S

City Naples State FL Zip Code 34102-6525

Purpose of Disbursement  
Meeting meal

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: D242776

Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

71.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Bice Ristorante

Mailing Address 300 5th Ave S

City Naples State FL Zip Code 34102-6547

Purpose of Disbursement  
Meeting meal

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: D242774

Date of Disbursement

06 / 03 / 2008

Amount of Each Disbursement this Period

47.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Bleu Provence Restaurant	<b>Transaction ID:</b> D242799 <b>Date of Disbursement</b>
Mailing Address 1234 8th St S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 8</div> </div>
City Naples State FL Zip Code 34102-7320	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Meeting meal	<div> <div>167.89</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) IHOP	<b>Transaction ID:</b> D242798 <b>Date of Disbursement</b>
Mailing Address 7862 Montgomery Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 0 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45236	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Meeting meal	<div> <div>47.86</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Marriott Hotels	<b>Transaction ID:</b> D242777 <b>Date of Disbursement</b>
Mailing Address 4625 Lake Forest Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45242	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Meeting meal	<div> <div>24.80</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)

Marriott Hotels

Mailing Address 4625 Lake Forest Drive

City Cincinnati State OH Zip Code 45242

Purpose of Disbursement

Meeting meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242778

Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

30.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Marriott Hotels

Mailing Address 4625 Lake Forest Drive

City Cincinnati State OH Zip Code 45242

Purpose of Disbursement

Meeting meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242779

Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

45.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Sony Style Store

Mailing Address 7875 Montgomery Rd

City Cincinnati State OH Zip Code 45236-4344

Purpose of Disbursement

telephone headset

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242794

Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

106.49

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

T-Mobile

Mailing Address PO Box 37380

City Albuquerque, State NM Zip Code 87176

Purpose of Disbursement  
cell phones

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242792

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	0	8

Amount of Each Disbursement this Period

272.14

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Victoria E Wulsin

Mailing Address 8875 Spooky Ridge Ln

City Cincinnati State OH Zip Code 45242-7350

Purpose of Disbursement  
Mileage expenseCandidate Name  
Victoria WulsinCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 02

Transaction ID: D242789

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	0	8

Amount of Each Disbursement this Period

314.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Washington DC Taxicabs

Mailing Address Various Addresses

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Travel

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242780

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	0	8

Amount of Each Disbursement this Period

11.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Washington DC Taxicabs

Mailing Address Various Addresses

City Washington State DC Zip Code 20003

Purpose of Disbursement

Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242781

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Washington DC Taxicabs

Mailing Address Various Addresses

City Washington State DC Zip Code 20003

Purpose of Disbursement

Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242783

Date of Disbursement

/   /

Amount of Each Disbursement this Period

24.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Washington DC Taxicabs

Mailing Address Various Addresses

City Washington State DC Zip Code 20003

Purpose of Disbursement

Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242784

Date of Disbursement

/   /

Amount of Each Disbursement this Period

32.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Washington DC Taxicabs	<b>Transaction ID:</b> D242785 <b>Date of Disbursement</b>
Mailing Address      Various Addresses	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6      2 9      2 0 0 8</div> </div>
City      State      Zip Code Washington      DC      20003	<b>Amount of Each Disbursement this Period</b> <div>25.00</div>
Purpose of Disbursement Travel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Washington DC Taxicabs	<b>Transaction ID:</b> D242787 <b>Date of Disbursement</b>
Mailing Address      Various Addresses	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6      2 9      2 0 0 8</div> </div>
City      State      Zip Code Washington      DC      20003	<b>Amount of Each Disbursement this Period</b> <div>11.00</div>
Purpose of Disbursement Travel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Wynn's Family Market	<b>Transaction ID:</b> D242775 <b>Date of Disbursement</b>
Mailing Address      141 9th St N	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6      0 4      2 0 0 8</div> </div>
City      State      Zip Code Naples      FL      34102-6296	<b>Amount of Each Disbursement this Period</b> <div>145.86</div>
Purpose of Disbursement Event costs/fundraising	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div> <div>Category/Type</div> <div></div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Debra A Patek

Mailing Address 125 Lakefield Drive

City State Zip Code  
Milford OH 45150

Purpose of Disbursement  
Reimbursement see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242802

Date of Disbursement

/   /

Amount of Each Disbursement this Period

120.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Fallen Heroes Dinner

Mailing Address Matt Maupin Scholarship Fund

City State Zip Code  
Cincinnati OH 45245

Purpose of Disbursement  
Dinner/scholarship donation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242803

Date of Disbursement

/   /

Amount of Each Disbursement this Period

120.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City State Zip Code  
Baltimore MD 21218

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242804

Date of Disbursement

/   /

Amount of Each Disbursement this Period

257.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

377.12

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**

Full Name (Last, First, Middle Initial)

Airtran Airways

Mailing Address 9955 Airtran Blvd

City Orlando State FL Zip Code 32827-5330

Purpose of Disbursement  
Travel

Candidate Name

Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: D242809

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	8	

Amount of Each Disbursement this Period

85.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Alamo Rental Car

Mailing Address 6929 N Lakewood Ave

City Tulsa State OK Zip Code 74117-1823

Purpose of Disbursement  
Travel

Candidate Name

Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: D242808

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	8	

Amount of Each Disbursement this Period

171.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: D242805

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	8	

Amount of Each Disbursement this Period

381.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

381.68

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Safeway

Mailing Address 415 14th St SE

City Washington State DC Zip Code 20003-3002

Purpose of Disbursement

Food for event

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: D242811

Date of Disbursement

04 / 29 / 2008

Amount of Each Disbursement this Period

333.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Yellow Cab of DC, Inc

Mailing Address 1636 Bladensburg Road

City Washington State DC Zip Code 20002

Purpose of Disbursement

Taxi cabs; travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: D242810

Date of Disbursement

04 / 29 / 2008

Amount of Each Disbursement this Period

48.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement

Reimbursement - see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: D242806

Date of Disbursement

05 / 15 / 2008

Amount of Each Disbursement this Period

310.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

310.68

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Central Parking

Mailing Address Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242812

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Central Parking

Mailing Address Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242813

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242817

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242807

Date of Disbursement

/   /

Amount of Each Disbursement this Period

375.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Amtrak

Mailing Address Penn Station

City New York State NY Zip Code 10001

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

14.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Amtrak

Mailing Address Penn Station

City New York State NY Zip Code 10001

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242823

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

375.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Central Parking

Mailing Address Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Airport parking  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
State: District:

Transaction ID: D242814  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

18.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Central Parking

Mailing Address Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Parking  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
State: District:

Transaction ID: D242815  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Central Parking

Mailing Address Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Airport parking  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
State: District:

Transaction ID: D242816  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

27.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242818

Date of Disbursement

06 / 01 / 2008

Amount of Each Disbursement this Period

194.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Potbelly Sandwiches

Mailing Address 2692 Madison Rd

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Travel - meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242824

Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

15.61

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Washington DC Taxicabs

Mailing Address Various Addresses

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242819

Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

15.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Washington DC Taxicabs	<b>Transaction ID:</b> D242820 <b>Date of Disbursement</b>
Mailing Address Various Addresses	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div> <div>15.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Washington DC Taxicabs	<b>Transaction ID:</b> D242821 <b>Date of Disbursement</b>
Mailing Address Various Addresses	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div> <div>55.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) John Newby	<b>Transaction ID:</b> D242825 <b>Date of Disbursement</b>
Mailing Address 3910 Hopper Hill Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 9 / 2 0 0 8</div> </div>
City Anderson State OH Zip Code 45255	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimbursement - see below	<div> <div>22.74</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

22.74

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**Full Name (Last, First, Middle Initial)  
Kroger

Mailing Address 7580 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4221

Purpose of Disbursement  
Volunteer snacks

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242826

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Amount of Each Disbursement this Period

22.74

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**Full Name (Last, First, Middle Initial)  
Stuart C. Wulsin

Mailing Address 8875 Spooky Ridge Lane

City Cincinnati State OH Zip Code 45242

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242830

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	8

Amount of Each Disbursement this Period

32.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**Full Name (Last, First, Middle Initial)  
Staples

Mailing Address 8666 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4710

Purpose of Disbursement  
Supplies for event

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242831

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	8

Amount of Each Disbursement this Period

32.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

32.23

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Tina M Herald <hr/> Mailing Address 2751 8 Mile Raod	<b>Transaction ID:</b> D242832 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45244 Purpose of Disbursement Reimbursement - see below Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>126.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) United States Post Office <hr/> Mailing Address 7737 Laurel AVE <hr/> City Cincinnati State OH Zip Code 45243 Purpose of Disbursement Postage Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> D242833 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>126.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Ann Herzner <hr/> Mailing Address 947 Auburnview Drive <hr/> City Cincinnati State OH Zip Code 45206 Purpose of Disbursement Reimbursements (see below) and mileage Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> D242834 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>181.24</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**307.24**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Alesci's

Mailing Address 4333 Mayfield Rd

City Cleveland State OH Zip Code 44121-3662

Purpose of Disbursement  
Campaign travel - meal  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D234138  
Date of Disbursement

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 8

Amount of Each Disbursement this Period

3.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Ann Herzner

Mailing Address 947 Auburnview Drive

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement  
mileage reimbursement  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D234140  
Date of Disbursement

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 8

Amount of Each Disbursement this Period

166.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Subway Restaurant

Mailing Address 325 Bic Dr

City Milford State CT Zip Code 06461-3072

Purpose of Disbursement  
Meal  
Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: District:

Transaction ID: D234139  
Date of Disbursement

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 0 8

Amount of Each Disbursement this Period

10.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242837

Date of Disbursement

/   /

Amount of Each Disbursement this Period

88.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Pay Pal

Mailing Address 2211 N 1st St

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
GPS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242841

Date of Disbursement

/   /

Amount of Each Disbursement this Period

88.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242838

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

183.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Pay Pal

Mailing Address 2211 N 1st St

City State Zip Code  
San Jose CA 95131

Purpose of Disbursement  
Camera

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242842

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City State Zip Code  
Cincinnati OH 45208

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242839

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Busken Bakery

Mailing Address Beechmont Avenue

City State Zip Code  
Anderson OH 45255

Purpose of Disbursement  
volunteer snacks

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242843

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

8.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Parking Company of America</p> <p>Mailing Address 618 Petersburg Rd</p> <p>City Hebron State KY Zip Code 41048-9611</p> <p>Purpose of Disbursement Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242844  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 5 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>5.00</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53  <b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cynthia L Graham</p> <p>Mailing Address 792 Pickwick Drive</p> <p>City Cincinnati State OH Zip Code 45255</p> <p>Purpose of Disbursement Reimbursement - see below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242846  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 5 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>24.00</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kroger</p> <p>Mailing Address 7580 Beechmont Ave</p> <p>City Cincinnati State OH Zip Code 45255-4221</p> <p>Purpose of Disbursement Volunteer snacks</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242848  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>19.00</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53  <b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

24.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Staples

Mailing Address 8666 Beechmont Ave

City Cincinnati State OH Zip Code 45255-4710

Purpose of Disbursement  
copies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242849

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Daniel L. Ticotsky

Mailing Address 2328 Easthill Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Reimbursement - see below

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242850

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.76

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Costco Wholesale

Mailing Address 9691 Waterstone Blvd

City Cincinnati State OH Zip Code 45249

Purpose of Disbursement  
Water for event

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242851

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.76

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

95.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Quickbooks Payroll Service	<b>Transaction ID:</b> D242852 <b>Date of Disbursement</b>
Mailing Address 2632 Marine Way Via online connections	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Mountain View State CA Zip Code 94043-1126	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Direct deposit payroll and fees	<div> <div>4067.19</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<div> <div>Category/Type</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Stacey Bhaerman	<b>Transaction ID:</b> D243169 <b>Date of Disbursement</b>
Mailing Address 4 Arbor Circle #423	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Net pay	<div> <div>777.09</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<div> <div>Category/Type</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Cheryl Crowe	<b>Transaction ID:</b> D242873 <b>Date of Disbursement</b>
Mailing Address 3545 Zumstein Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 2 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45208	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Net pay	<div> <div>650.87</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<div> <div>Category/Type</div> </div>

**SUBTOTAL** of Disbursements This Page (optional) .....

4067.19

**TOTAL** This Period (last page this line number only) .....

X	17		18		19a		19b
	20a		20b		20c		21

NAME OF COMMITTEE (In Full)  
Wulsin for Congress

FEC Schedule B ( Form 3 ) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Joshua S Levin

Mailing Address 1080 Nimitzview Dr  
Ste 400

City Cincinnati State OH Zip Code 45230-4332

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242912

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1138.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242899

Date of Disbursement

/   /

Amount of Each Disbursement this Period

297.88

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D243174

Date of Disbursement

/   /

Amount of Each Disbursement this Period

413.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Quickbooks Payroll Service</p> <p>Mailing Address 2632 Marine Way Via online connections</p> <p>City Mountain View State CA Zip Code 94043-1126</p> <p>Purpose of Disbursement Direct deposit payroll and fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242853  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 4 / 0 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  3207.66</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Ms. Stacey Bhaerman</p> <p>Mailing Address 4 Arbor Circle #423</p> <p>City Cincinnati State OH Zip Code 45255</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D243170  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 4 / 0 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  777.11</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Cheryl Crowe</p> <p>Mailing Address 3545 Zumstein Ave</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242874  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 4 / 0 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  650.87</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

3207.66

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**

Full Name (Last, First, Middle Initial)

Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242915

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	0	8

Amount of Each Disbursement this Period

9.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242887

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	0	8

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Mrs. Ann Herzner

Mailing Address 947 Auburnview Drive

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242866

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	0	8

Amount of Each Disbursement this Period

541.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Joshua S Levin</p> <p>Mailing Address 1080 Nimitzview Dr Ste 400</p> <p>City Cincinnati State OH Zip Code 45230-4332</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D242913</p> <p><b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 9 / 2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div> <div></div> <div>278.67</div> </div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) David Margolis</p> <p>Mailing Address 1315 Delta Ave APT 1</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D242900</p> <p><b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 9 / 2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div> <div></div> <div>297.89</div> </div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Sean Pace-Scrivener</p> <p>Mailing Address 7193 Foxview Dr</p> <p>City Cincinnati State OH Zip Code 45230</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D243175</p> <p><b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 9 / 2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div> <div></div> <div>413.83</div> </div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Quickbooks Payroll Service</p> <p>Mailing Address 2632 Marine Way Via online connections</p> <p>City Mountain View State CA Zip Code 94043-1126</p> <p>Purpose of Disbursement Direct deposit payroll and fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D242854  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>2927.91</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Ms. Stacey Bhaerman</p> <p>Mailing Address 4 Arbor Circle #423</p> <p>City Cincinnati State OH Zip Code 45255</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D243171  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>777.09</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Cheryl Crowe</p> <p>Mailing Address 3545 Zumstein Ave</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D242875  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>650.87</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2927.91**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Ann Glazer	<b>Transaction ID:</b> D242916 <b>Date of Disbursement</b>
Mailing Address 3561 Outlook Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45208	Amount of Each Disbursement this Period
Purpose of Disbursement Net pay	<div> <div></div> <div>9.17</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div></div> </div>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Cynthia L Graham	<b>Transaction ID:</b> D242888 <b>Date of Disbursement</b>
Mailing Address 792 Pickwick Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45255	Amount of Each Disbursement this Period
Purpose of Disbursement Net pay	<div> <div></div> <div>227.29</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div></div> </div>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Ann Herzner	<b>Transaction ID:</b> D242867 <b>Date of Disbursement</b>
Mailing Address 947 Auburnview Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 6 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45206	Amount of Each Disbursement this Period
Purpose of Disbursement Net pay	<div> <div></div> <div>541.21</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <div>Category/Type</div> <div></div> </div>
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)

David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement

Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242901

Date of Disbursement

04 / 16 / 2008

Amount of Each Disbursement this Period

297.88

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement

Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243176

Date of Disbursement

04 / 16 / 2008

Amount of Each Disbursement this Period

413.82

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Quickbooks Payroll Service

Mailing Address 2632 Marine Way  
Via online connections

City Mountain View State CA Zip Code 94043-1126

Purpose of Disbursement

Direct deposit payroll and fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242855

Date of Disbursement

04 / 23 / 2008

Amount of Each Disbursement this Period

3228.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

3228.87

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 327 / 364

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**

Full Name (Last, First, Middle Initial)

Ms. Stacey Bhaerman

Mailing Address 4 Arbor Circle #423

City  
CincinnatiState  
OHZip Code  
45255Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243172

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Amount of Each Disbursement this Period

777.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City  
CincinnatiState  
OHZip Code  
45208Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242876

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Amount of Each Disbursement this Period

650.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City  
CincinnatiState  
OHZip Code  
45208Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242917

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	8

Amount of Each Disbursement this Period

9.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242889

Date of Disbursement

/   /

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Ann Herzner

Mailing Address 947 Auburnview Drive

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242868

Date of Disbursement

/   /

Amount of Each Disbursement this Period

541.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242902

Date of Disbursement

/   /

Amount of Each Disbursement this Period

598.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Sean Pace-Scrivener Mailing Address 7193 Foxview Dr	<b>Transaction ID:</b> D243177 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 3 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45230 Purpose of Disbursement Net pay Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>413.83</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Quickbooks Payroll Service Mailing Address 2632 Marine Way Via online connections City Mountain View State CA Zip Code 94043-1126 Purpose of Disbursement Direct deposit payroll and fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D242856 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3066.82</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Stacey Bhaerman Mailing Address 4 Arbor Circle #423 City Cincinnati State OH Zip Code 45255 Purpose of Disbursement Net pay Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243173 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>777.09</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3066.82**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**

Full Name (Last, First, Middle Initial)

Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement

Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242877

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

Amount of Each Disbursement this Period

650.88

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement

Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242918

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

Amount of Each Disbursement this Period

9.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement

Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242890

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Ann Herzner

Mailing Address 947 Auburnview Drive

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242869

Date of Disbursement

/   /

Amount of Each Disbursement this Period

574.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242903

Date of Disbursement

/   /

Amount of Each Disbursement this Period

403.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243178

Date of Disbursement

/   /

Amount of Each Disbursement this Period

413.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Quickbooks Payroll Service</p> <p>Mailing Address 2632 Marine Way Via online connections</p> <p>City Mountain View State CA Zip Code 94043-1126</p> <p>Purpose of Disbursement Direct deposit payroll and fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D242857  <b>Date of Disbursement</b>  <div>05 / 07 / 2008</div></p> <p>Amount of Each Disbursement this Period  <div>3507.93</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Cheryl Crowe</p> <p>Mailing Address 3545 Zumstein Ave</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D242878  <b>Date of Disbursement</b>  <div>05 / 07 / 2008</div></p> <p>Amount of Each Disbursement this Period  <div>650.87</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mary Ann Glazer</p> <p>Mailing Address 3561 Outlook Ave.</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D242919  <b>Date of Disbursement</b>  <div>05 / 07 / 2008</div></p> <p>Amount of Each Disbursement this Period  <div>9.16</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3507.93**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242891

Date of Disbursement

/   /

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243188

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1218.22

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Ann Herzner

Mailing Address 947 Auburnview Drive

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242870

Date of Disbursement

/   /

Amount of Each Disbursement this Period

574.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Margolis Mailing Address 1315 Delta Ave APT 1	<b>Transaction ID:</b> D242904 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 7 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45208 Purpose of Disbursement Net pay Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div>403.33</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Sean Pace-Scrivener Mailing Address 7193 Foxview Dr City Cincinnati State OH Zip Code 45230 Purpose of Disbursement Net pay Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243179 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 7 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div>413.83</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Quickbooks Payroll Service Mailing Address 2632 Marine Way Via online connections City Mountain View State CA Zip Code 94043-1126 Purpose of Disbursement Direct deposit payroll and fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D242858 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div>3507.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53         </div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3507.94**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242879

Date of Disbursement

/   /

Amount of Each Disbursement this Period

650.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242920

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242892

Date of Disbursement

/   /

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D243189

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Ann Herzner

Mailing Address 947 Auburnview Drive

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242871

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242905

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D243180

Date of Disbursement

/   /

Amount of Each Disbursement this Period

413.82

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Quickbooks Payroll Service

Mailing Address 2632 Marine Way  
Via online connections

City Mountain View State CA Zip Code 94043-1126

Purpose of Disbursement  
Direct deposit payroll and fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242859

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3507.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242880

Date of Disbursement

/   /

Amount of Each Disbursement this Period

650.88

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

3507.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242921

Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

9.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242893

Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243190

Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

1218.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)  
Mrs. Ann Herzner

Mailing Address 947 Auburnview Drive

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242872

Date of Disbursement

/   /

Amount of Each Disbursement this Period

574.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242906

Date of Disbursement

/   /

Amount of Each Disbursement this Period

403.32

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243181

Date of Disbursement

/   /

Amount of Each Disbursement this Period

413.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Quickbooks Payroll Service</p> <p>Mailing Address 2632 Marine Way Via online connections</p> <p>City Mountain View State CA Zip Code 94043-1126</p> <p>Purpose of Disbursement Direct deposit payroll and fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D242860  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 8 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>2932.24</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Cheryl Crowe</p> <p>Mailing Address 3545 Zumstein Ave</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D242881  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 8 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>650.87</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mary Ann Glazer</p> <p>Mailing Address 3561 Outlook Ave.</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President            Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼            State: District:</p>	<p><b>Transaction ID:</b> D242922  <b>Date of Disbursement</b>  <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 8 / 2 0 0 8</div></p> <p>Amount of Each Disbursement this Period  <div>9.17</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2932.24**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**Full Name (Last, First, Middle Initial)  
Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242894

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243191

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

Amount of Each Disbursement this Period

1218.22

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**Full Name (Last, First, Middle Initial)  
David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242907

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

Amount of Each Disbursement this Period

403.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Sean Pace-Scrivener Mailing Address 7193 Foxview Dr	<b>Transaction ID:</b> D243182 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 8 / 2 0 0 8</div> </div>
City Cincinnati State OH Zip Code 45230 Purpose of Disbursement Net pay Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div>413.84</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Quickbooks Payroll Service Mailing Address 2632 Marine Way Via online connections City Mountain View State CA Zip Code 94043-1126 Purpose of Disbursement Direct deposit payroll and fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D242861 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div>3370.63</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53         </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Cheryl Crowe Mailing Address 3545 Zumstein Ave City Cincinnati State OH Zip Code 45208 Purpose of Disbursement Net pay Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D242882 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div>650.87</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b> </div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**3370.63**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Kevin C Franck

Mailing Address 240 M St SW

City Washington State DC Zip Code 20024-3659

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243202

Date of Disbursement

/   /

Amount of Each Disbursement this Period

437.32

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242923

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242895

Date of Disbursement

/   /

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243193

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1218.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242908

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

403.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243183

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

413.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Quickbooks Payroll Service</p> <p>Mailing Address 2632 Marine Way Via online connections</p> <p>City Mountain View State CA Zip Code 94043-1126</p> <p>Purpose of Disbursement Direct deposit payroll and fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242862  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 6 / 1 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  3566.15</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Cheryl Crowe</p> <p>Mailing Address 3545 Zumstein Ave</p> <p>City Cincinnati State OH Zip Code 45208</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D242883  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 6 / 1 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  650.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kevin C Franck</p> <p>Mailing Address 240 M St SW</p> <p>City Washington State DC Zip Code 20024-3659</p> <p>Purpose of Disbursement Net pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State: District:</p> <p>Disbursement For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D243203  <b>Date of Disbursement</b>  M M / D D / Y Y Y Y  0 6 / 1 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period  632.83</p> <p><input type="checkbox"/> Refund or Disposal of Excess  Contributions Required Under  11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

3566.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Ann Glazer Mailing Address 3561 Outlook Ave.	<b>Transaction ID:</b> D242924 <b>Date of Disbursement</b> <div> <div>06</div> <div>11</div> <div>2008</div> </div>
City Cincinnati State OH Zip Code 45208 Purpose of Disbursement Net pay Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>9.17</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Cynthia L Graham Mailing Address 792 Pickwick Drive City Cincinnati State OH Zip Code 45255 Purpose of Disbursement Net pay Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D242896 <b>Date of Disbursement</b> <div> <div>06</div> <div>11</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>227.29</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Este Griffith Mailing Address 503 E. 35th Street City Baltimore State MD Zip Code 21218 Purpose of Disbursement Net pay Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D243194 <b>Date of Disbursement</b> <div> <div>06</div> <div>11</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1218.24</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.**

Full Name (Last, First, Middle Initial)

David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242909

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Amount of Each Disbursement this Period

403.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243184

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Amount of Each Disbursement this Period

413.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Quickbooks Payroll Service

Mailing Address 2632 Marine Way  
Via online connections

City Mountain View State CA Zip Code 94043-1126

Purpose of Disbursement  
Direct deposit payroll and fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242863

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	0	8

Amount of Each Disbursement this Period

3566.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**SUBTOTAL** of Disbursements This Page (optional) .....

3566.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement

Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242884

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

650.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Kevin C Franck

Mailing Address 240 M St SW

City Washington State DC Zip Code 20024-3659

Purpose of Disbursement

Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243205

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

632.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement

Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242925

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

9.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242897

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243196

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

1218.22

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242910

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

403.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D243185

Date of Disbursement

/   /

Amount of Each Disbursement this Period

413.82

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Quickbooks Payroll Service

Mailing Address 2632 Marine Way  
Via online connections

City Mountain View State CA Zip Code 94043-1126

Purpose of Disbursement  
Direct deposit payroll and fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242864

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3853.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Cheryl Crowe

Mailing Address 3545 Zumstein Ave

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D242885

Date of Disbursement

/   /

Amount of Each Disbursement this Period

650.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

3853.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Kevin C Franck

Mailing Address 240 M St SW

City Washington State DC Zip Code 20024-3659

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: D243207

Date of Disbursement

/   /

Amount of Each Disbursement this Period

632.84

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Mary Ann Glazer

Mailing Address 3561 Outlook Ave.

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: D243166

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Cynthia L Graham

Mailing Address 792 Pickwick Drive

City Cincinnati State OH Zip Code 45255

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: D242898

Date of Disbursement

/   /

Amount of Each Disbursement this Period

227.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 352 / 364

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Este Griffith

Mailing Address 503 E. 35th Street

City Baltimore State MD Zip Code 21218

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243198

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1218.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
David Margolis

Mailing Address 1315 Delta Ave APT 1

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242911

Date of Disbursement

/   /

Amount of Each Disbursement this Period

403.32

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Sean Pace-Scrivener

Mailing Address 7193 Foxview Dr

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D243186

Date of Disbursement

/   /

Amount of Each Disbursement this Period

413.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 353 / 364

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)

Jens Suttmoller

Mailing Address 6981 Tradewind Court

City  
Maineville

State  
OH

Zip Code  
45039

Purpose of Disbursement  
Net pay

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: D243216

Date of Disbursement

/   /

Amount of Each Disbursement this Period

286.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

144685.55

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 354 / 364

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

A.

Full Name (Last, First, Middle Initial)

Stephen Elliott

Mailing Address 490 Second Street #200

City  
San Francisco

State  
CA

Zip Code  
94107

Purpose of Disbursement  
Return 6/29 contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D244833

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Amount of Each Disbursement this Period

700.00
--------

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

700.00

TOTAL This Period (last page this line number only) .....

700.00

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 355 / 364

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Wulsin for Congress

**A.**

Full Name (Last, First, Middle Initial)

Sinnard for Ohio

Mailing Address PO Box 30314

City  
Cincinnati

State  
OH

Zip Code  
45230

Purpose of Disbursement  
Contribution to campaign

Candidate Name  
Sinnard for Ohio

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D242796

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

0.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 356 / 364

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Ms. Stacey BhaermanNature of Debt (Purpose):  
Cell & Mileage reimburse-  
ment

Mailing Address 4 Arbor Circle #423

City State ZIP Code  
Cincinnati OH 45255

Outstanding Balance Beginning This Period

116.45

Transaction ID: D234136

Amount Incurred This Period

0.00

Payment This Period

116.45

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Ms. Stacey BhaermanNature of Debt (Purpose):  
Payroll - primary win bon-  
us

Mailing Address 4 Arbor Circle #423

City State ZIP Code  
Cincinnati OH 45255

Outstanding Balance Beginning This Period

3867.50

Transaction ID: D232021

Amount Incurred This Period

0.00

Payment This Period

3867.50

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Ms. Stacey BhaermanNature of Debt (Purpose):  
Expenses due at end of qtr

Mailing Address 4 Arbor Circle #423

City State ZIP Code  
Cincinnati OH 45255

Outstanding Balance Beginning This Period

876.20

Transaction ID: D231965

Amount Incurred This Period

0.00

Payment This Period

876.20

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

0.00

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 357 / 364

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mr. walter blairNature of Debt (Purpose):  
Expenses due at end of qtr

Mailing Address 3494 Forestoak Ct

City State ZIP Code  
cincinnati OH 45208

Outstanding Balance Beginning This Period

137.13

Transaction ID: D231972

Amount Incurred This Period

0.00

Payment This Period

137.13

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cheryl CroweNature of Debt (Purpose):  
Net payroll

Mailing Address 3545 Zumstein Ave

City State ZIP Code  
Cincinnati OH 45208

Outstanding Balance Beginning This Period

1333.58

Transaction ID: D232005

Amount Incurred This Period

0.00

Payment This Period

1333.58

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cheryl CroweNature of Debt (Purpose):  
Expenses due end of qtr

Mailing Address 3545 Zumstein Ave

City State ZIP Code  
Cincinnati OH 45208

Outstanding Balance Beginning This Period

75.00

Transaction ID: D231679

Amount Incurred This Period

0.00

Payment This Period

75.00

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

0.00

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 358 / 364

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cheryl Crowe

Nature of Debt (Purpose):  
Expenses due end of qtr

Mailing Address 3545 Zumstein Ave

City State ZIP Code  
Cincinnati OH 45208

Outstanding Balance Beginning This Period

46.10

Transaction ID: D231682

Amount Incurred This Period

0.00

Payment This Period

46.10

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Five Mile Investments LLC

Nature of Debt (Purpose):  
Due 3/1/08 Rent & utilities
Mailing Address 7162 Reading Road  
Suite 730
City State ZIP Code  
Cincinnati OH 45237

Outstanding Balance Beginning This Period

940.00

Transaction ID: D231090

Amount Incurred This Period

0.00

Payment This Period

940.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cynthia L Graham

Nature of Debt (Purpose):  
Mileage reimbursement

Mailing Address 792 Pickwick Drive

City State ZIP Code  
Cincinnati OH 45255

Outstanding Balance Beginning This Period

48.16

Transaction ID: D231048

Amount Incurred This Period

0.00

Payment This Period

48.16

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 359 / 364

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mrs. Ann Herzner

Nature of Debt (Purpose):  
Expenses due end of qtr

Mailing Address 947 Auburnview Drive

City State ZIP Code  
Cincinnati OH 45206

Outstanding Balance Beginning This Period

181.24

Transaction ID: D234134

Amount Incurred This Period

0.00

Payment This Period

181.24

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Bryan Hoffman

Nature of Debt (Purpose):  
Mileage reimbursement

Mailing Address 6105 S Clippinger Dr

City State ZIP Code  
Cincinnati OH 45243-3228

Outstanding Balance Beginning This Period

25.97

Transaction ID: D231669

Amount Incurred This Period

0.00

Payment This Period

25.97

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Joshua S Levin

Nature of Debt (Purpose):  
Payroll - primary wn bonus
Mailing Address 1080 Nimitzview Dr  
Ste 400
City State ZIP Code  
Cincinnati OH 45230-4332

Outstanding Balance Beginning This Period

4254.25

Transaction ID: D232014

Amount Incurred This Period

0.00

Payment This Period

4254.25

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 360 / 364

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Joshua S LevinNature of Debt (Purpose):  
Expenses due end of qtrMailing Address 1080 Nimitzview Dr  
Ste 400City State ZIP Code  
Cincinnati OH 45230-4332

Outstanding Balance Beginning This Period

1377.30

Transaction ID: D231100

Amount Incurred This Period

0.00

Payment This Period

1377.30

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
David MargolisNature of Debt (Purpose):  
Payroll - primary win bon-  
us

Mailing Address 1315 Delta Ave APT 1

City State ZIP Code  
Cincinnati OH 45208

Outstanding Balance Beginning This Period

789.39

Transaction ID: D232012

Amount Incurred This Period

0.00

Payment This Period

789.39

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Marcia R OganowskiNature of Debt (Purpose):  
Website design

Mailing Address 1614 Bitter Creek Lane

City State ZIP Code  
Batavia OH 45103

Outstanding Balance Beginning This Period

250.00

Transaction ID: D232049

Amount Incurred This Period

0.00

Payment This Period

250.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 361 / 364

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Sean Pace-Scrivener

Nature of Debt (Purpose):  
Payroll - primary win bon-  
us

Mailing Address 7193 Foxview Dr

City State ZIP Code  
Cincinnati OH 45230

Outstanding Balance Beginning This Period

399.85

Transaction ID: D232019

Amount Incurred This Period

0.00

Payment This Period

399.85

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Sammy Pettinichi

Nature of Debt (Purpose):  
Mileage reimbursement
Mailing Address 3800 Victory Pkwy  
ML 8185
City State ZIP Code  
Cincinnati OH 45207

Outstanding Balance Beginning This Period

17.85

Transaction ID: D231963

Amount Incurred This Period

0.00

Payment This Period

17.85

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
PNC Bank

Nature of Debt (Purpose):  
Credit card debt at end  
of qtr

Mailing Address 201 East Fifth Street

City State ZIP Code  
Cincinnati OH 45202

Outstanding Balance Beginning This Period

4989.46

Transaction ID: D231890

Amount Incurred This Period

0.00

Payment This Period

4989.46

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 362 / 364

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Wulsin for Congress

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
PNC Bank

Nature of Debt (Purpose):  
Credit card debt at end  
of qtr

Mailing Address 201 East Fifth Street

City State ZIP Code  
Cincinnati OH 45202

Outstanding Balance Beginning This Period

1320.81

Transaction ID: D231944

Amount Incurred This Period

0.00

Payment This Period

1320.81

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Daniel L. Ticotsky

Nature of Debt (Purpose):  
Expense due end of qtr

Mailing Address 2328 Easthill Ave.

City State ZIP Code  
Cincinnati OH 45208

Outstanding Balance Beginning This Period

163.00

Transaction ID: D231078

Amount Incurred This Period

0.00

Payment This Period

163.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
United States Treasury

Nature of Debt (Purpose):  
941 Tax pymt, partial, for  
March

Mailing Address Via EFTPS online payment

City State ZIP Code  
Washington DC 20500

Outstanding Balance Beginning This Period

4135.74

Transaction ID: D234638

Amount Incurred This Period

0.00

Payment This Period

4135.74

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 363 / 364

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
United States TreasuryNature of Debt (Purpose):  
941 tax March, partial

Mailing Address Via EFTPS online payment

City State ZIP Code  
Washington DC 20500

Outstanding Balance Beginning This Period

1348.30

Transaction ID: D234641

Amount Incurred This Period

0.00

Payment This Period

1348.30

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
United States TreasuryNature of Debt (Purpose):  
941 tax due on primary bo

Mailing Address Via EFTPS online payment

City State ZIP Code  
Washington DC 20500

Outstanding Balance Beginning This Period

3478.74

Transaction ID: D234642

Amount Incurred This Period

0.00

Payment This Period

3478.74

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Victoria E WulsinNature of Debt (Purpose):  
Expenses due end of qtr

Mailing Address 8875 Spooky Ridge Ln

City State ZIP Code  
Cincinnati OH 45242-7350

Outstanding Balance Beginning This Period

90.55

Transaction ID: D234147

Amount Incurred This Period

0.00

Payment This Period

90.55

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

0.00

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 364 / 364

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Wulsin for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Victoria E WulsinNature of Debt (Purpose):  
Expenses due end of qtr

Mailing Address 8875 Spooky Ridge Ln

City State ZIP Code  
Cincinnati OH 45242-7350

Outstanding Balance Beginning This Period

711.36

Transaction ID: D234656

Amount Incurred This Period

0.00

Payment This Period

711.36

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Victoria E WulsinNature of Debt (Purpose):  
Expenses due end of quarter

Mailing Address 8875 Spooky Ridge Ln

City State ZIP Code  
Cincinnati OH 45242-7350

Outstanding Balance Beginning This Period

177.08

Transaction ID: D234658

Amount Incurred This Period

0.00

Payment This Period

177.08

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Victoria E WulsinNature of Debt (Purpose):  
Expense due end of qtr

Mailing Address 8875 Spooky Ridge Ln

City State ZIP Code  
Cincinnati OH 45242-7350

Outstanding Balance Beginning This Period

82.00

Transaction ID: D231976

Amount Incurred This Period

0.00

Payment This Period

82.00

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

0.00

**2) TOTALS** This Period (last page this line number only).....

0.00

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

0.00