

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Fighting for Ohio Fund

ADDRESS (number and street) PO Box 26141

Check if different than previously reported. (ACC) Alexandria VA 22313

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

C C00573014

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M M / D D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2016 through M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Marston, Christopher, M, ,

Type or Print Name of Treasurer _____

Signature of Treasurer Marston, Christopher, M, , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2016

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Fighting for Ohio Fund

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---|---|
| 6. (a) Cash on Hand January 1, <input type="text" value="2016"/> | | <input type="text" value="2164835.67"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="2753452.20"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="1822400.00"/> | <input type="text" value="2599000.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="4575852.20"/> | <input type="text" value="4763835.67"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="3917272.36"/> | <input type="text" value="4105255.83"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="658579.84"/> | <input type="text" value="658579.84"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Fighting for Ohio Fund

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 1822400.00 | 2597400.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 1822400.00 | 2597400.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 1822400.00 | 2597400.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 1600.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 1822400.00 | 2599000.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 1822400.00 | 2599000.00 |

DETAILED SUMMARY PAGE

of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 113554.14 | 301537.61 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 113554.14 | 301537.61 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 3803718.22 | 3803718.22 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 3917272.36 | 4105255.83 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 3917272.36 | 4105255.83 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 1822400.00 | 2597400.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 1822400.00 | 2597400.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 113554.14 | 301537.61 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 113554.14 | 301537.61 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This amendment reflects the change in the opening balance as a result of the amendment to the prior period. It also reports two inadvertently omitted transactions--credit card processing fees.

Form/Schedule:
Transaction ID:

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 7 OF 30 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

| | | |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Boich, Wayne, , , | | Date of Receipt MM / DD / YYYY 05 / 30 / 2016 |
| Mailing Address 41 S High St Ste 3750 | | Transaction ID : SA11AI.4430 |
| City Columbus | State OH | Zip Code 43215 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20000.00 |
| Name of Employer (for Individual) Boich Companies | Occupation (for Individual) Executive | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 20000.00 | |

| | | |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Carson, Russell, L., , | | Date of Receipt MM / DD / YYYY 06 / 07 / 2016 |
| Mailing Address 930 Fifth Ave | | Transaction ID : SA11AI.4447 |
| City New York | State NY | Zip Code 10021 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 8950.00 |
| Name of Employer (for Individual) Welsh Carson Anderson & Stone | Occupation (for Individual) Private Equity | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 8950.00 | |

| | | |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Childs, John, W, , | | Date of Receipt MM / DD / YYYY 06 / 30 / 2016 |
| Mailing Address 165 Sago Palm Rd | | Transaction ID : SA11AI.4459 |
| City Vero beach | State FL | Zip Code 32963 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50000.00 |
| Name of Employer (for Individual) J.W. Childs Assoc | Occupation (for Individual) finance | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 50000.00 | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 78950.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 8 OF 30 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

A. Delaney, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 667 Madison Ave
 FI 10
 City New York State NY Zip Code 10065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crestview Occupation (for Individual) Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 04 / 26 / 2016
Transaction ID : SA11AI.4464
 Amount of Each Receipt this Period 25000.00
 Memo Item

B. Dicke, James, F., , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 E South St
 City New Bremen State OH Zip Code 45869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crown Equipment Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 04 / 01 / 2016
Transaction ID : SA11AI.4422
 Amount of Each Receipt this Period 50000.00
 Memo Item

C. Dicke, James, F., , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 E South St
 City New Bremen State OH Zip Code 45869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crown Equipment Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 04 / 01 / 2016
Transaction ID : SA11AI.4424
 Amount of Each Receipt this Period 50000.00
 Memo Item

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 125000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 9 OF 30 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

A. Global Mine Service, Inc
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 Marins St
 City Belle Vernon State PA Zip Code 15012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 05 / 30 / 2016
Transaction ID : SA11AI.4441
 Amount of Each Receipt this Period 7500.00
 Memo Item

B. Greenspan, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 Cohawney Rd
 City Scarsdale State NY Zip Code 10583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 State Path Capital Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 24 / 2016
Transaction ID : SA11AI.4455
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. Henle, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 Dusenberry Rd
 City Bronxville State NY Zip Code 10708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 DLH Capital Finance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 24 / 2016
Transaction ID : SA11AI.4457
 Amount of Each Receipt this Period 1000.00
 Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 18500.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 30 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

A. Jay, Jeffrey, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Fox Run Ln

| | | |
|-------------------|-------------|-------------------|
| City Greenwich | State CT | Zip Code 06831 |
|-------------------|-------------|-------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Self | Occupation (for Individual) Venture Capital |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2016

Transaction ID : SA11AI.4437

Amount of Each Receipt this Period
5000.00

Memo Item

B. Johnson, Charles, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1220 S Ocean Blvd

| | | |
|--------------------|-------------|-------------------|
| City Palm Beach | State FL | Zip Code 33480 |
|--------------------|-------------|-------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) Franklin Resources | Occupation (for Individual) Chairman |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
MM / DD / YYYY
04 / 12 / 2016

Transaction ID : SA11AI.4425

Amount of Each Receipt this Period
100000.00

Memo Item

C. Lafley, A., G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 990 Boulevard of the Arts
Ste 1602

| | | |
|------------------|-------------|-------------------|
| City Sarasota | State FL | Zip Code 34236 |
|------------------|-------------|-------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Proctor & Gamble | Occupation (for Individual) Executive |
|---|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2016

Transaction ID : SA11AI.4436

Amount of Each Receipt this Period
10000.00

Memo Item

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 115000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 30 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

A. Lawrence, Larry, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 Brookrdige Dr
 City Greenwich State CT Zip Code 06830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2016
Transaction ID : SA11AI.4434
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Luczo, Stephen, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 277
 City Los Gatos State CA Zip Code 95031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Seagate Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016
Transaction ID : SA11AI.4450
 Amount of Each Receipt this Period
 50000.00
 Memo Item

C. Mandel, Stephen, J, , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Greenwich Plz Fl 2
 City Greenwich State CT Zip Code 06830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lone Pine Capital Occupation (for Individual) Finance
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.4460
 Amount of Each Receipt this Period
 100000.00
 Memo Item

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 155000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 30 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

| | | |
|---|---------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Mercer, Robert, L, , | | Date of Receipt |
| Mailing Address 800 Third Ave | | MM / DD / YYYY 05 / 16 / 2016 |
| City New York | State NY | Zip Code 10022 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : SA11AI.4395 |
| Name of Employer (for Individual) Renaissance Technologies | | Occupation (for Individual) Executive |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500000.00 | Amount of Each Receipt this Period 500000.00 |
| <input type="checkbox"/> Memo Item | | |

| | | |
|---|--------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Miller, Donald, K, , | | Date of Receipt |
| Mailing Address 225 Via Tortuga | | MM / DD / YYYY 05 / 04 / 2016 |
| City Palm Beach | State FL | Zip Code 33480 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : SA11AI.4368 |
| Name of Employer (for Individual) Asiom Investments | | Occupation (for Individual) Finance |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 10000.00 | Amount of Each Receipt this Period 10000.00 |
| <input type="checkbox"/> Memo Item | | |

| | | |
|---|--------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mixon, A, Malachi, , III | | Date of Receipt |
| Mailing Address 3105 Topping Ln | | MM / DD / YYYY 06 / 07 / 2016 |
| City Hunting Valley | State OH | Zip Code 44022 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : SA11AI.4452 |
| Name of Employer (for Individual) Invacare International Corp | | Occupation (for Individual) President |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ 10000.00 | Amount of Each Receipt this Period 10000.00 |
| <input type="checkbox"/> Memo Item | | |

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 520000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 30 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

A. Perelman, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 E 62nd St
 City New York State NY Zip Code 10065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MacAndrews & Forbes Occupation (for Individual) Chairman and CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 100000.00

Date of Receipt **04 / 18 / 2016**
Transaction ID : SA11AI.4427
 Amount of Each Receipt this Period 100000.00
 Memo Item

B. Reschini, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 Philadelphia St
 City Indiana State PA Zip Code 15701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Reschini Group Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 16000.00

Date of Receipt **05 / 30 / 2016**
Transaction ID : SA11AI.4432
 Amount of Each Receipt this Period 16000.00
 Memo Item

C. Roberston, Julian, H, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 Park Ave
 City New York State NY Zip Code 10178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tiger Management Capital Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 100000.00

Date of Receipt **06 / 30 / 2016**
Transaction ID : SA11AI.4462
 Amount of Each Receipt this Period 100000.00
 Memo Item

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 216000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 30 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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

NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

A. Rosenwald, E, John, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 944 Fifth Ave
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8950.00

Date of Receipt 06 / 07 / 2016
Transaction ID : SA11AI.4448
 Amount of Each Receipt this Period 8950.00
 Memo Item

B. Singer, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 W 57th St FI 30
 City New York State NY Zip Code 10019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Elliott Management Corporation Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt 06 / 23 / 2016
Transaction ID : SA11AI.4454
 Amount of Each Receipt this Period 500000.00
 Memo Item

C. Swanson Industries
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 Smithtown Rd
 City Morgantown State WV Zip Code 26508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 30 / 2016
Transaction ID : SA11AI.4439
 Amount of Each Receipt this Period 10000.00
 Memo Item

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 518950.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 30 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

A. Timken, Ward, J, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 Market Ave N
 Ste 210
 City Canton State OH Zip Code 44702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TimkenSteel Corporation Occupation (for Individual) Chairman and CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **25000.00**

Date of Receipt **06 / 07 / 2016**
Transaction ID : SA11AI.4445
 Amount of Each Receipt this Period **25000.00**
 Memo Item

B. Yancey Bros. Co.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 Lee Industrial Blvd
 City Austell State GA Zip Code 30168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **50000.00**

Date of Receipt **06 / 07 / 2016**
Transaction ID : SA11AI.4443
 Amount of Each Receipt this Period **50000.00**
 Memo Item

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

| | |
|---|-------------------|
| SUBTOTAL of Receipts This Page (optional)..... | 75000.00 |
| TOTAL This Period (last page this line number only)..... | 1822400.00 |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Anedot | | Date of Disbursement MM / DD / YYYY 04 / 08 / 2016 | |
| Mailing Address 5555 Hilton Ave Ste 106 | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.4680 | |
| City Baton Rouge | State LA | Zip Code 70808 | Amount of Each Disbursement this Period [REDACTED] 390.30 |
| Purpose of Disbursement CC Processing | | Category/ Type [REDACTED] | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Anedot | | Date of Disbursement MM / DD / YYYY 04 / 08 / 2016 | |
| Mailing Address 5555 Hilton Ave Ste 106 | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.4681 | |
| City Baton Rouge | State LA | Zip Code 70808 | Amount of Each Disbursement this Period [REDACTED] 390.30 |
| Purpose of Disbursement CC Processing | | Category/ Type [REDACTED] | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Anedot | | Date of Disbursement MM / DD / YYYY 05 / 30 / 2016 | |
| Mailing Address 5555 Hilton Ave Ste 106 | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.4466 | |
| City Baton Rouge | State LA | Zip Code 70808 | Amount of Each Disbursement this Period [REDACTED] 390.30 |
| Purpose of Disbursement CC Processing | | Category/ Type [REDACTED] | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|--------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 1170.90 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

Full Name (Last, First, Middle Initial)

A. Anedot

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2016

FEC Identification Number

C
Transaction ID : SB21B.4468
Amount of Each Disbursement this Period
390.30

Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

FEC Identification Number

C
Transaction ID : SB21B.4469
Amount of Each Disbursement this Period
39.30

Memo Item

Full Name (Last, First, Middle Initial)

C. Clark Hill PLC

Mailing Address 601 Pennsylvania Ave NW Ste 1000

City Washington State DC Zip Code 20004

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB21B.4480
Amount of Each Disbursement this Period
24842.70

Memo Item

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

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

25272.30

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

A. Clark Hill PLC

Full Name (Last, First, Middle Initial)

Mailing Address 601 Pennsylvania Ave NW
Ste 1000

City Washington State DC Zip Code 20004

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 06 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4481

Amount of Each Disbursement this Period: 6080.00

Memo Item

B. First Wave Concepts LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4258 Mayfair Ln

City Port Orange State FL Zip Code 32129

Purpose of Disbursement Website Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 30 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4482

Amount of Each Disbursement this Period: 650.00

Memo Item

C. Guthrie, Scott, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1714 Bay St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 28 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4483

Amount of Each Disbursement this Period: 10000.00

Memo Item

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

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

16730.00

SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 26 | <input type="checkbox"/> | 27 |
| <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

Full Name (Last, First, Middle Initial)

A. Guthrie, Scott, , ,

Mailing Address 1714 Bay St SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4484

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Main Street Media Group

Mailing Address PO Box 25093

City
Alexandria

State
VA

Zip Code
22313

Purpose of Disbursement
Shipping

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4393

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. McCarthy Hennings Whalen, Inc.

Mailing Address 1850 M St NW
Ste 235

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Media Consultant Expenses

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4495

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. MMM Consulting | | Date of Disbursement MM / DD / YYYY 05 / 03 / 2016 |
| Mailing Address 755 Boylston St Ste 304 | | FEC Identification Number C [] Transaction ID : SB21B.4485 Amount of Each Disbursement this Period [] 7500.00 |
| City Boston | State MA | Zip Code 02116 |
| Purpose of Disbursement Fundraising Consulng | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. MMM Consulting | | Date of Disbursement MM / DD / YYYY 05 / 09 / 2016 |
| Mailing Address 755 Boylston St Ste 304 | | FEC Identification Number C [] Transaction ID : SB21B.4486 Amount of Each Disbursement this Period [] 7913.20 |
| City Boston | State MA | Zip Code 02116 |
| Purpose of Disbursement Fundraising Consulting; Consultant Expenses | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. MMM Consulting | | Date of Disbursement MM / DD / YYYY 06 / 06 / 2016 |
| Mailing Address 755 Boylston St Ste 304 | | FEC Identification Number C [] Transaction ID : SB21B.4487 Amount of Each Disbursement this Period [] 7500.00 |
| City Boston | State MA | Zip Code 02116 |
| Purpose of Disbursement Fundraising Consulting | | Category/ Type [] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

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

[] 22913.20

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

[]

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Steiner Strategy Group | | Date of Disbursement MM / DD / YYYY 06 / 06 / 2016 |
| Mailing Address 88 E Broad St Ste 1220 | | FEC Identification Number C [] Transaction ID : SB21B.4488 |
| City Columbus | State OH | Zip Code 43215 |
| Purpose of Disbursement Strategic Consulting | | Amount of Each Disbursement this Period [] 4000.00 |
| Candidate Name | | Memo Item <input type="checkbox"/> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Category/Type | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Whatman Associates, Inc. | | Date of Disbursement MM / DD / YYYY 05 / 03 / 2016 |
| Mailing Address 6650 Stoffer Rd | | FEC Identification Number C [] Transaction ID : SB21B.4490 |
| City Bellville | State OH | Zip Code 44813 |
| Purpose of Disbursement Strategic Consulting | | Amount of Each Disbursement this Period [] 10000.00 |
| Candidate Name | | Memo Item <input type="checkbox"/> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Category/Type | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Whatman Associates, Inc. | | Date of Disbursement MM / DD / YYYY 05 / 24 / 2016 |
| Mailing Address 6650 Stoffer Rd | | FEC Identification Number C [] Transaction ID : SB21B.4491 |
| City Bellville | State OH | Zip Code 44813 |
| Purpose of Disbursement Strategic Consulting | | Amount of Each Disbursement this Period [] 10000.00 |
| Candidate Name | | Memo Item <input type="checkbox"/> |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | Category/Type | |

| | |
|--|--------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [] 24000.00 |
| TOTAL This Period (last page this line number only).....▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. Whatman Associates, Inc. | | Date of Disbursement MM / DD / YYYY 06 / 20 / 2016 | |
| Mailing Address 6650 Stoffer Rd | | FEC Identification Number C | |
| City Bellville | State OH | Zip Code 44813 | Transaction ID : SB21B.4492 |
| Purpose of Disbursement Strategic Consulting | | Category/ Type | Amount of Each Disbursement this Period 10000.00 |
| Candidate Name | | | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement MM / DD / YYYY | |
| Mailing Address | | FEC Identification Number C | |
| City | State | Zip Code | Amount of Each Disbursement this Period |
| Purpose of Disbursement | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY | |
| Mailing Address | | FEC Identification Number C | |
| City | State | Zip Code | Amount of Each Disbursement this Period |
| Purpose of Disbursement | | Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|-----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 10000.00 |
| TOTAL This Period (last page this line number only).....▶ | 113399.14 |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Fighting for Ohio Fund
FEC IDENTIFICATION NUMBER C C00573014

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Main Street Media Group
Mailing Address PO Box 25093
City Alexandria State VA Zip Code 22313
Purpose of Expenditure Advertising
Date of Public Distribution/Dissemination 05/06/2016
Amount 1500000.00
Transaction ID: SE.4366
Date of Disbursement or Obligation 05/04/2016

Name of Federal Candidate: STRICKLAND, TED, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Main Street Media Group
Mailing Address PO Box 25093
City Alexandria State VA Zip Code 22313
Purpose of Expenditure Advertising - TV
Date of Public Distribution/Dissemination 05/26/2016
Amount 21281.00
Transaction ID: SE.4386
Date of Disbursement or Obligation 05/24/2016

Name of Federal Candidate: STRICKLAND, TED, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1521281.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marston, Christopher, M, ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Fighting for Ohio Fund
FEC IDENTIFICATION NUMBER C C00573014

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Main Street Media Group
Mailing Address PO Box 25093
City Alexandria State VA Zip Code 22313
Purpose of Expenditure Advertising - TV
Date of Public Distribution/Dissemination 06/01/2016
Amount 739354.00
Transaction ID : SE.4391
Date of Disbursement or Obligation 05/26/2016

Name of Federal Candidate: STRICKLAND, TED, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Main Street Media Group
Mailing Address PO Box 25093
City Alexandria State VA Zip Code 22313
Purpose of Expenditure Advertising - TV
Date of Public Distribution/Dissemination 06/09/2016
Amount 739365.00
Transaction ID : SE.4392
Date of Disbursement or Obligation 05/26/2016

Name of Federal Candidate: STRICKLAND, TED, ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1478719.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marston, Christopher, M, ,

[Electronically Filed]

Date

10/27/2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|--|---|
| NAME OF COMMITTEE (In Full) Fighting for Ohio Fund | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573014 </div> |
|--|---|

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | | | | |
|--|--|--------------------|-------------------|-------------------|
| Full Name of Payee <input type="checkbox"/> Memo Item Main Street Media Group | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 29 / 2016 </div> | | | |
| Mailing Address PO Box 25093 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 459901.14 </div> | | | |
| <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Alexandria</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22313</td> </tr> </table> | | City Alexandria | State VA | Zip Code 22313 |
| City Alexandria | | State VA | Zip Code 22313 | |
| Purpose of Expenditure Advertising - TV | | | | |
| Name of Federal Candidate: STRICKLAND, TED, , , | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 3762443.28 </div> | | | | |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | | | |

| | | | | |
|--|--|--------------------|-------------------|-------------------|
| Full Name of Payee <input type="checkbox"/> Memo Item Main Street Media Group | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 29 / 2016 </div> | | | |
| Mailing Address PO Box 25093 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 28730.00 </div> | | | |
| <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Alexandria</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22313</td> </tr> </table> | | City Alexandria | State VA | Zip Code 22313 |
| City Alexandria | | State VA | Zip Code 22313 | |
| Purpose of Expenditure Advertising - TV | | | | |
| Name of Federal Candidate: STRICKLAND, TED, , , | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | | | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 3791173.28 </div> | | | | |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | | | | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 488631.14 </div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div> |
| (a) TOTAL Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marston, Christopher, M, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|--|---|
| NAME OF COMMITTEE (In Full) Fighting for Ohio Fund | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00573014 </div> |
|--|---|

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | | | | | | | |
|--|--|-------|----------|----------|--------------|----|-------|
| Full Name of Payee <input type="checkbox"/> Memo Item Majority Strategies | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 06 / 2016 | | | | | | |
| Mailing Address 12854 Kenan Dr Ste 145 | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 52000.00 </div> Transaction ID : SE.4375 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 16 / 2016 | | | | | | |
| <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Jacksonville</td> <td>FL</td> <td>32258</td> </tr> </table> | | City | State | Zip Code | Jacksonville | FL | 32258 |
| City | | State | Zip Code | | | | |
| Jacksonville | FL | 32258 | | | | | |
| Purpose of Expenditure Advertising - Mobile | | | | | | | |
| Name of Federal Candidate: STRICKLAND, TED, , , | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ _____ District: _____ State: OH | | | | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1571604.10 </div> | | | | | | |

| | | | | | | | |
|--|--|-------|----------|----------|--------------|----|-------|
| Full Name of Payee <input type="checkbox"/> Memo Item Majority Strategies | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 14 / 2016 | | | | | | |
| Mailing Address 12854 Kenan Dr Ste 145 | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 20000.00 </div> Transaction ID : SE.4377 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 16 / 2016 | | | | | | |
| <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Jacksonville</td> <td>FL</td> <td>32258</td> </tr> </table> | | City | State | Zip Code | Jacksonville | FL | 32258 |
| City | | State | Zip Code | | | | |
| Jacksonville | FL | 32258 | | | | | |
| Purpose of Expenditure Advertising - Mobile | | | | | | | |
| Name of Federal Candidate: STRICKLAND, TED, , , | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ _____ District: _____ State: OH | | | | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1591604.10 </div> | | | | | | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 72000.00 </div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div> |
| (a) TOTAL Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marston, Christopher, M, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Fighting for Ohio Fund
FEC IDENTIFICATION NUMBER
C C00573014

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Majority Strategies
Mailing Address: 12854 Kenan Dr, Ste 145, Jacksonville, FL 32258
Purpose of Expenditure: Advertising - Mobile
Date of Public Distribution/Dissemination: 05/16/2016
Amount: 78000.00
Transaction ID: SE.4378
Date of Disbursement or Obligation: 05/16/2016
Name of Federal Candidate: STRICKLAND, TED, , , Oppose
Office Sought: Senate, State: OH
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 1669604.10

Full Name of Payee: Majority Strategies
Mailing Address: 12854 Kenan Dr, Ste 145, Jacksonville, FL 32258
Purpose of Expenditure: Advertising - Digital
Date of Public Distribution/Dissemination: 06/05/2016
Amount: 100000.00
Transaction ID: SE.4400
Date of Disbursement or Obligation: 06/06/2016
Name of Federal Candidate: STRICKLAND, TED, , , Oppose
Office Sought: Senate, State: OH
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 3287895.81

(a) SUBTOTAL of Itemized Independent Expenditures: 178000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marston, Christopher, M, ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|--|---|
| NAME OF COMMITTEE (In Full) Fighting for Ohio Fund | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573014 </div> |
|--|---|

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc. | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 05 / 06 / 2016 </div> |
| Mailing Address 1850 M St NW Ste 235 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 19604.10 </div> |
| City Washington State DC Zip Code 20036 | |
| Purpose of Expenditure Advertising - Production Category/Type | |
| Name of Federal Candidate: STRICKLAND, TED, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: OH <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 1519604.10 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc. | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 05 / 26 / 2016 </div> |
| Mailing Address 1850 M St NW Ste 235 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 7274.73 </div> |
| City Washington State DC Zip Code 20036 | |
| Purpose of Expenditure Advertising - Creative Category/Type | |
| Name of Federal Candidate: STRICKLAND, TED, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: OH <input type="checkbox"/> President |
| Calendar Year-To-Date Per Election for Office Sought 1698159.83 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> 26878.83 </div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |
| (a) TOTAL Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marston, Christopher, M, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|--|---|
| NAME OF COMMITTEE (In Full) Fighting for Ohio Fund | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00573014 </div> |
|--|---|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc. | Date of Public Distribution/Dissemination 06 / 01 / 2016 |
| Mailing Address 1850 M St NW Ste 235 | Amount 11016.98 |
| City Washington State DC Zip Code 20036 | |
| Purpose of Expenditure Advertising - Creative Category/Type | |
| Name of Federal Candidate: STRICKLAND, TED, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: OH |
| Calendar Year-To-Date Per Election for Office Sought 3187895.81 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc. | Date of Public Distribution/Dissemination 06 / 01 / 2016 |
| Mailing Address 1850 M St NW Ste 235 | Amount 14646.33 |
| City Washington State DC Zip Code 20036 | |
| Purpose of Expenditure Advertising - Production Category/Type | |
| Name of Federal Candidate: STRICKLAND, TED, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: OH |
| Calendar Year-To-Date Per Election for Office Sought 3302542.14 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | 25663.31 |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (a) TOTAL Independent Expenditures ▶ | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marston, Christopher, M, ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|--|---|
| NAME OF COMMITTEE (In Full) Fighting for Ohio Fund | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573014 </div> |
|--|---|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | | | | |
|--|---|--------------------|-------------------|-------------------|
| Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc. | Date of Public Distribution/Dissemination 06 / 29 / 2016 | | | |
| Mailing Address 1850 M St NW Ste 235 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12544.94</div> Transaction ID : SE.4411 Date of Disbursement or Obligation 06 / 28 / 2016 | | | |
| <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Washington</td> <td style="width:17%; border-bottom: 1px solid black;">State DC</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 20036</td> </tr> </table> | | City Washington | State DC | Zip Code 20036 |
| City Washington | | State DC | Zip Code 20036 | |
| Purpose of Expenditure Advertising - Production | | | | |
| Name of Federal Candidate: <input type="checkbox"/> Support STRICKLAND, TED, , , <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH | | | |
| Calendar Year-To-Date Per Election for Office Sought 3803718.22 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ | | | |

| | | | | |
|--|---|-------|----------|----------|
| Full Name of Payee <input type="checkbox"/> Memo Item | Date of Public Distribution/Dissemination / / | | | |
| Mailing Address | Amount <div style="border: 1px solid black; padding: 2px;"> </div> Date of Disbursement or Obligation / / | | | |
| <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:17%; border-bottom: 1px solid black;">State</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code</td> </tr> </table> | | City | State | Zip Code |
| City | | State | Zip Code | |
| Purpose of Expenditure | | | | |
| Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ | | | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;">12544.94</div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px;"> </div> |
| (a) TOTAL Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;">3803718.22</div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Marston, Christopher, M, , **[Electronically Filed]** Date 10 / 27 / 2016
 Signature