

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

FRIENDS OF FRED ODE

ADDRESS (number and street)

17800 ROYALTON ROAD

Check if different
than previously
reported. (ACC)

STRONGSVILLE

OH

44136

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00917146

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

OH

00

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

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2025

through

M M / D D / Y Y Y Y
12 / 31 / 2025

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

Wright, Brian, , ,

Signature of Treasurer

Wright, Brian, , ,

Date

M M / D D / Y Y Y Y
01 / 30 / 2026

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**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

FRIENDS OF FRED ODE

Report Covering the Period:

From:

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

To:

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

	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))....	0.00	5000000.00
(b) Total Contribution Refunds (from Line 20(d))	4540000.00	4540000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 4540000.00	460000.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	137272.12	415958.16
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	137272.12	415958.16
8. Cash on Hand at Close of Reporting Period (from Line 27).....	40628.49	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

FRIENDS OF FRED ODE

Report Covering the Period:

From:

MM / DD / YYYY
10 / 01 / 2025

To:

MM / DD / YYYY
12 / 31 / 2025**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).....

0.00

5000000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL of contributions
from individuals ▶

0.00

5000000.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

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

0.00

5000000.00

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.)

0.00

0.00

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

69.88

86.65

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

69.88

5000086.65

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	137272.12	415958.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	4540000.00	4540000.00
(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 20(a), (b), and (c)).....	4540000.00	4540000.00
21. OTHER DISBURSEMENTS	3500.00	3500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4680772.12	4959458.16

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4721330.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	69.88
25. SUBTOTAL (add Line 23 and Line 24).....	4721400.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4680772.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	40628.49

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Bagui, Fabian, , ,

Mailing Address 15001 Lenox Drive

City
StrongsvilleState
OHZip Code
44136Purpose of Disbursement
Transportation

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.4152

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Caplin & Drysdale, Chtd.Mailing Address 1200 New Hampshire Avenue NW
8th FLCity
WashingtonState
DCZip Code
20036Purpose of Disbursement
Legal services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3108.00

Transaction ID : SB17.4150

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Caplin & Drysdale, Chtd.Mailing Address 1200 New Hampshire Avenue NW
8th FLCity
WashingtonState
DCZip Code
20036Purpose of Disbursement
Legal services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4229.50

Transaction ID : SB17.4155

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7537.50

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Caplin & Drysdale, Chtd.Mailing Address 1200 New Hampshire Avenue NW
8th FLCity
WashingtonState
DCZip Code
20036Purpose of Disbursement
Legal services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

592.00

Transaction ID : SB17.4159

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Carney, Helanea, , ,

Mailing Address 9820 Root Road

City
Columbia StationState
OHZip Code
44028Purpose of Disbursement
Campaign Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : SB17.4144

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Carney, Helanea, , ,

Mailing Address 9820 Root Road

City
Columbia StationState
OHZip Code
44028Purpose of Disbursement
Campaign Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : SB17.4149

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2192.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Carney, Helanea, , ,

Mailing Address 9820 Root Road

City
Columbia StationState
OHZip Code
44028Purpose of Disbursement
Campaign Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : SB17.4156

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Carney, Helanea, , ,

Mailing Address 9820 Root Road

City
Columbia StationState
OHZip Code
44028Purpose of Disbursement
Campaign Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : SB17.4157

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Carney, Helanea, , ,

Mailing Address 9820 Root Road

City
Columbia StationState
OHZip Code
44028Purpose of Disbursement
Campaign Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : SB17.4158

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2400.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. CMIT Solutions of Cleveland SW

Mailing Address 17800 Royalton Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2025

City
StrongsvilleState
OHZip Code
44136

FEC Identification Number

C

Purpose of Disbursement
IT Services

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1469.89

Transaction ID : SB17.4151

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. CMIT Solutions of Cleveland SW

Mailing Address 17800 Royalton Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2025

City
StrongsvilleState
OHZip Code
44136

FEC Identification Number

C

Purpose of Disbursement
IT Services

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

485.70

Transaction ID : SB17.4154

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.4163

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1957.84

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

29.73

Transaction ID : SB17.4165

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

202.77

Transaction ID : SB17.4166

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

4.81

Transaction ID : SB17.4167

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

237.31

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

16.41

Transaction ID : SB17.4168

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

83.16

Transaction ID : SB17.4169

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

135.00

Transaction ID : SB17.4170

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

234.57

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

4.81

Transaction ID : SB17.4171

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

83.16

Transaction ID : SB17.4172

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

4.81

Transaction ID : SB17.4173

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

92.78

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 21

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

83.16

Transaction ID : SB17.4174

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

4.81

Transaction ID : SB17.4175

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		05		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

83.16

Transaction ID : SB17.4176

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

171.13

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

4.81

Transaction ID : SB17.4177

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Compass Payroll

Mailing Address 6140 Parkland Blvd Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2025

City
Mayfield HeightsState
OHZip Code
44124

FEC Identification Number

C

Purpose of Disbursement
Payroll Fee

001

Amount of Each Disbursement this Period

167.94

Transaction ID : SB17.4178

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Gordon, Willis, , ,

Mailing Address 1655 Bexwell Street, NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2025

City
CantonState
OHZip Code
44714

FEC Identification Number

C

Purpose of Disbursement
Salary

001

Amount of Each Disbursement this Period

21037.05

Transaction ID : SB17.4179

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

21209.80

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Herman, Kyle, , ,

Mailing Address 3652 Hiwood Ave

City
StowState
OHZip Code
44224Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

23737.19

Transaction ID : SB17.4183

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Huntington, Connor, , ,

Mailing Address 14816 Hilliard

City
LakewoodState
OHZip Code
44107Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3328.50

Transaction ID : SB17.4164

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Huntington, Connor, , ,

Mailing Address 14816 Hilliard

City
LakewoodState
OHZip Code
44107Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3584.54

Transaction ID : SB17.4180

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

30650.23

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Huntington, Connor, , ,

Mailing Address 14816 Hilliard

City
LakewoodState
OHZip Code
44107Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3557.32

Transaction ID : SB17.4184

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Huntington, Connor, , ,

Mailing Address 14816 Hilliard

City
LakewoodState
OHZip Code
44107Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3477.93

Transaction ID : SB17.4186

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Huntington, Connor, , ,

Mailing Address 14816 Hilliard

City
LakewoodState
OHZip Code
44107Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3477.93

Transaction ID : SB17.4188

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10513.18

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Huntington, Connor, , ,

Mailing Address 14816 Hilliard

City
LakewoodState
OHZip Code
44107Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3477.93

Transaction ID : SB17.4190

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Huntington, Connor, , ,

Mailing Address 14816 Hilliard

City
LakewoodState
OHZip Code
44107Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3477.93

Transaction ID : SB17.4192

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mahler, Elijah, , ,

Mailing Address 1500 Detroit Ave., 2-404

City
ClevelandState
OHZip Code
44113Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3541.86

Transaction ID : SB17.4181

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10497.72

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 21

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Mahler, Elijah, , ,

Mailing Address 1500 Detroit Ave., 2-404

City
ClevelandState
OHZip Code
44113Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3510.83

Transaction ID : SB17.4185

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mahler, Elijah, , ,

Mailing Address 1500 Detroit Ave., 2-404

City
ClevelandState
OHZip Code
44113Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3436.52

Transaction ID : SB17.4187

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mahler, Elijah, , ,

Mailing Address 1500 Detroit Ave., 2-404

City
ClevelandState
OHZip Code
44113Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3436.52

Transaction ID : SB17.4189

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10383.87

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR 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)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Mahler, Elijah, , ,

Mailing Address 1500 Detroit Ave., 2-404

City
ClevelandState
OHZip Code
44113Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3436.52

Transaction ID : SB17.4191

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mahler, Elijah, , ,

Mailing Address 1500 Detroit Ave., 2-404

City
ClevelandState
OHZip Code
44113Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3436.52

Transaction ID : SB17.4194

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ode Ventures

Mailing Address 17800 Royalton Road

City
StronsgvilleState
OHZip Code
44136Purpose of Disbursement
Funding of drawing account for campaign mgmt and admin services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4162

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

16873.04

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Pinnacle Press

Mailing Address 2960 Harrisburg Rd NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2025

City
CantonState
OHZip Code
44075

FEC Identification Number

C

Purpose of Disbursement
Business cards

001

Amount of Each Disbursement this Period

212.95

Transaction ID : SB17.4143

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Ross, Chais, , ,

Mailing Address 416 Overbrook Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2025

City
CantonState
OHZip Code
44720

FEC Identification Number

C

Purpose of Disbursement
Salary

001

Amount of Each Disbursement this Period

15114.21

Transaction ID : SB17.4182

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Saling, Maranda, , ,

Mailing Address 338 18th St NW #2

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2025

City
CantonState
OHZip Code
44703

FEC Identification Number

C

Purpose of Disbursement
Campaign consulting

001

Amount of Each Disbursement this Period

6800.00

Transaction ID : SB17.4153

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

22127.16

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

137078.13

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 19b
☒ 20a	☐ 20b	☐ 20c	☐ 21

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)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Ode, Fred, , ,

Mailing Address 17800 Royalton Road

City
StronsgvilleState
OHZip Code
44136Purpose of Disbursement
Refund of contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4540000.00

Transaction ID : SB20A.4161

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4540000.00

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

4540000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 21

☐ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF FRED ODE

Full Name (Last, First, Middle Initial)

A. Friends of Bansek

Mailing Address 3376 Coopers Trail

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2025

City
LorainState
OHZip Code
44053

FEC Identification Number

C

Purpose of Disbursement
Non-Federal Political Contribution

011

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.4142

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Lorain County Democratic Party

Mailing Address 416 Overbrook Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2025

City
ElyriaState
OHZip Code
44035

FEC Identification Number

C

Purpose of Disbursement
Non-Federal Political Contribution

011

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB21.4141

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

3500.00

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

3500.00