

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**
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

ADDRESS (number and street) **211 South Fifth Street**
Check if different than previously reported. (ACC) **Columbus OH 43215**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00162339 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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2021 through / / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Johnson, David, , Treasurer,
Type or Print Name of Treasurer

Signature of Treasurer *Johnson, David, , Treasurer,* [Electronically Filed] Date / / 2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

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="2021"/>	<input type="text" value="81266.60"/>	<input type="text" value="81266.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4632.90"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="168609.40"/>	<input type="text" value="370383.22"/>
(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="173242.30"/>	<input type="text" value="451649.82"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="97484.03"/>	<input type="text" value="375891.55"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="75758.27"/>	<input type="text" value="75758.27"/>
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="102599.63"/>	

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 / 01 / 2021 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2021

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).....	51626.00	64583.00
(ii) Unitemized	55415.56	107758.78
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	107041.56	172341.78
(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)	107041.56	172341.78
12. Transfers From Affiliated/Other Party Committees.....	0.00	3153.31
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	61567.84	61567.84
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	133320.29
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	133320.29
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	168609.40	370383.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	168609.40	237062.93

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	10875.82	36362.32
(ii) Non-Federal Share.....	40913.74	136791.58
(b) Other Federal Operating Expenditures	6471.86	52185.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	58261.42	225339.87
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)	0.00	0.00
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	39222.61	150551.68
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	39222.61	150551.68
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	97484.03	375891.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56570.29	239099.97

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)	107041.56	172341.78
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	107041.56	172341.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	17347.68	88548.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	61567.84	61567.84
38. Net Operating Expenditures (subtract Line 37 from Line 36)	- 44220.16	26980.45

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

Form/Schedule: F3XA
Transaction ID :

ALL PAYROLL AND RELATED BENEFITS APPEARING ON SCHEDULE H4 ARE FOR EMPLOYEES WHO WORKED LESS THAN 25% OF THEIR TIME ON FEDERAL ELECTION ACTIVITY OR ACTIVITIES RELATED TO A FEDERAL ELECTION.

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 60
<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. AIMAAN, SCOTT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 646

City LANCASTER	State OH	Zip Code 43130-0646
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2021

Transaction ID : SA11A.1748181

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. ANDERSON, RICHARD, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8222 LESOURDSVILLE-WEST CHESTER RD

City WEST CHESTER	State OH	Zip Code 45069-1932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2021

Transaction ID : SA11A.1747465

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. BEACH, E., DOUGLAS, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 112 WESLEYAN COURT

City ELYRIA	State OH	Zip Code 44035-6066
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2021

Transaction ID : SA11A.1747385

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
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: PAGE 8 OF 60
(check only one)

<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. BENSON, GEORGE, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 RIVERSIDE DR.

City ROCKY RIVER	State OH	Zip Code 44116-3098
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) CONSULTANT
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2021

Transaction ID : SA11A.1747294

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BOURQUEIN, MARILYN, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10132 SANDUSKY RD.

City HARRISON	State OH	Zip Code 45030-1230
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2021

Transaction ID : SA11A.1747821

Amount of Each Receipt this Period
221.00

Memo Item
CONTRIBUTION

C. CALVERT, CHARLES, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 NORTHCLIFF LN.

City RITTMAN	State OH	Zip Code 44270-9638
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2021

Transaction ID : SA11A.1747987

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	771.00
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: PAGE 9 OF 60
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. CALVERT, CHARLES, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 NORTHCLIFF LN.
 City RITTMAN State OH Zip Code 44270-9638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1748091
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. CHILLCOTT, JAMES, JAMES, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2225 WALNUT BLVD.
 City ASHTABULA State OH Zip Code 44004-2505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASHTABULA COUNTY MEDICAL CENTER Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1748136
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. CHOMCZYNSKI, PIOTR, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address MRC RESEARCH
 5645 MONTGOMERY RD.
 City CINCINNATI State OH Zip Code 45212-1846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MRC Occupation (for Individual) SAEUTIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 14 / 2021
Transaction ID : SA11A.1748211
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
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 60
	<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. COLETTI, ROBERT, E.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4885 DRAKE RD.
 City CINCINNATI State OH Zip Code 45243-4121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEATING, MUETHING & KLEKAMP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 10000.00

Date of Receipt 03 / 28 / 2021
Transaction ID : SA11A.1748506
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. COVELLI, SAMUEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 E MARKET ST. STE. 1
 City WARREN State OH Zip Code 44484-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COVELLI ENTERPRISES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1500.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747629
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. COVELLI, SAMUEL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3900 E MARKET ST. STE. 1
 City WARREN State OH Zip Code 44484-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COVELLI ENTERPRISES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1500.00

Date of Receipt 03 / 14 / 2021
Transaction ID : SA11A.1748218
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 11500.00
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 60
	<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. DELAWDER, DANIEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 635 HOWELL DR.

City NEWARK	State OH	Zip Code 43055-1531
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE PARK NATIONAL BANK	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2021

Transaction ID : SA11A.1747826

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. DICKERSON, LYNN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2610 STEWART RD.

City SOUTH CHARLESTON	State OH	Zip Code 45368-9362
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2021

Transaction ID : SA11A.1747945

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. DIEDERICH, NORMAN, F., , PH.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9004 TIMBER EDGE DR.

City NORTH RIDGEVILLE	State OH	Zip Code 44039-6321
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2021

Transaction ID : SA11A.1748229

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 60
<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. DUNSKER, STEWART, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5435 KENWOOD RD.
 APT. 1009
 City CINCINNATI State OH Zip Code 45227-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747595
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. FIBUS, KENNETH, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 REDFERN DR.
 City YOUNGSTOWN State OH Zip Code 44505-1663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DINESOL PLASTICS INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747599
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. FISCHER, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17520 LAKESEDGE TRAIL
 City CHAGRIN FALLS State OH Zip Code 44023-2115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2021
Transaction ID : SA11A.1748490
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1200.00
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 60
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. FOSTER, WILTON, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PINEWOOD LN.
 City HUDSON State OH Zip Code 44236-3468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALORIS Occupation (for Individual) IT DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1747939
 Amount of Each Receipt this Period
 900.00
 Memo Item
 CONTRIBUTION

B. FREEMAN, ARDEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5233 HARBOR POINTE DR
 City GALENA State OH Zip Code 43021-9025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1747948
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

C. GILLESPIE, ANN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1260 COUNTY LINE RD.
 City GATES MILLS State OH Zip Code 44040-9379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1747800
 Amount of Each Receipt this Period
 600.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 60
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. GORMAN, JAMES, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1885 MILLSBORO RD.
 City MANSFIELD State OH Zip Code 44906-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1748099
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. HARMAN, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 476 RIDDLE RD. #402
 City CINCINNATI State OH Zip Code 45220-2411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1747582
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

C. HEAPHY, MICHAEL, R., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 WAKASHAN TRL.
 City LIMA State OH Zip Code 45805-4125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1747594
 Amount of Each Receipt this Period
 1500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11800.00
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 60
	<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. HEATHER, TIMOTHY, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4412 HUBBLE RD.
 City CINCINNATI State OH Zip Code 45247-6020
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) SELF Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 21 / 2021
Transaction ID : SA11A.1748457
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. HENDRY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1466 S. MAIN ST. UNIT 104
 City NORTH CANTON State OH Zip Code 44720-9301
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) 31 INCORPORATED Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747566
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

C. HOOVER, JERRY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6651 BAERTOWN RD. NW
 City DOVER State OH Zip Code 44622-7695
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) SELF Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2021
Transaction ID : SA11A.1748495
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 16 OF 60
	<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. JAKMIDES, JEFFREY, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1485 BRIARWOOD ROAD
 City ALLIANCE State OH Zip Code 44601-3903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2021
Transaction ID : SA11A.1748442
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. JEANBLANC, GUY, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10176 KENDALL LANE
 City STREETSBORO State OH Zip Code 44241-6528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747928
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. KAESGEN, DIETER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19460 FRAZIER DR.
 City ROCKY RIVER State OH Zip Code 44116-1727
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 21 / 2021
Transaction ID : SA11A.1748483
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	700.00
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 17 OF 60
<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. LAUGHLIN, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10297 WILDFLOWER WAY
 City BROADVIEW HEIGHTS State OH Zip Code 44147-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747740
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LITTLE, GENE, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2910 CROYDON DR. N.W.
 City CANTON State OH Zip Code 44718-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIZAN FINANCIAL CORPORATION Occupation (for Individual) VP, FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 14 / 2021
Transaction ID : SA11A.1748404
 Amount of Each Receipt this Period 350.00
 Memo Item CONTRIBUTION

C. MAAS, ANTHONY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 SALES AVE.
 City HARRISON State OH Zip Code 45030-1485
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 28 / 2021
Transaction ID : SA11A.1748504
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10600.00
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 18 OF 60
	<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. MARQUART, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7858 MCCARTHY RD.
 City NEW WASHINGTON State OH Zip Code 44854-9790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747576
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. MILLIGAN, JOHN, R., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1607 S. MAIN ST.
 City NORTH CANTON State OH Zip Code 44709-4235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747432
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MORAN, ANGIE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 SHORES DR.
 City YOUNGSTOWN State OH Zip Code 44514-3400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WINDOW WORLD OF YOUNGSTOWN Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2021
Transaction ID : SA11A.1748310
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 19 OF 60
	<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. NEKOLA, LOU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10766 MEADOW TRL.
 City STRONGSVILLE State OH Zip Code 44149-2162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE TOWNSEND CORPORATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2021
Transaction ID : SA11A.1748446
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

B. ONG, JOHN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 AURORA ST.
 STE. 2
 City HUDSON State OH Zip Code 44236-2913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1747391
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. OSTRANDER, WILLIAM, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 RED MAPLE WAY
 City CINCINNATI State OH Zip Code 45246-9100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1747753
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2000.00
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 20 OF 60
<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. PEART, GINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4505 DAVIS RD.
 City LONDON State OH Zip Code 43140-8703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2021
Transaction ID : SA11A.1748321
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. POGUE, RICHARD, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 LAKESIDE AVE. E
 City CLEVELAND State OH Zip Code 44114-1163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSULTANT TO JONES DAY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 14 / 2021
Transaction ID : SA11A.1748326
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

C. POTTER, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1432 COTSWOLD LN.
 City HAMILTON State OH Zip Code 45013-5188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 28 / 2021
Transaction ID : SA11A.1748595
 Amount of Each Receipt this Period 105.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	555.00
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 21 OF 60
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. ROBE, EDWARD, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 ROOSEVELT DR.
 City ATHENS State OH Zip Code 45701-1761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1747771
 Amount of Each Receipt this Period
 150.00
 Memo Item
 CONTRIBUTION

B. ROBE, EDWARD, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 ROOSEVELT DR.
 City ATHENS State OH Zip Code 45701-1761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021
Transaction ID : SA11A.1748100
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

C. ROBE, EDWARD, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 ROOSEVELT DR.
 City ATHENS State OH Zip Code 45701-1761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2021
Transaction ID : SA11A.1748592
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
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:		PAGE 22 OF 60	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. SCHLABACH, LEWIS, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2522 STATE ROUTE 93

City SUGARCREEK	State OH	Zip Code 44681-9628
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SCHLABACH EQUIPMENT INC.	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021

Transaction ID : SA11A.1747820

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SKAF, ROD, I., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5283 RESERVE DRIVE

City DUBLIN	State OH	Zip Code 43017-8620
----------------	-------------	------------------------

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

Name of Employer (for Individual) MASS MUTUAL	Occupation (for Individual) FINANCIAL PLANNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021

Transaction ID : SA11A.1748120

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

C. SMITH, DOYLE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19156 BLOSSER RD.

City DALTON	State OH	Zip Code 44618-9449
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021

Transaction ID : SA11A.1748344

Amount of Each Receipt this Period
200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	650.00
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 23 OF 60
<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. STEINER, EDWARD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2624 HANDASYDE AVE.
 City CINCINNATI State OH Zip Code 45208-2718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SQUIRE PATTON BOGGS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747862
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

B. STOKES, DEWEY, R., THE HONORA,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 WILLOW BEND LN.
 City COLUMBUS State OH Zip Code 43204-1432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747788
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. STONEBACK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5758 HERITAGE AVE.
 City MADISON State OH Zip Code 44057-1774
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JM PERFORMANCE PRODUCTS INC. Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747552
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 24 OF 60
<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. STUMPF, FOLDEN, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 71 MULLIGAN RD.

City ATHENS	State OH	Zip Code 45701-3738
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2021

Transaction ID : SA11A.1748127

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. STUMPF, FOLDEN, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 71 MULLIGAN RD.

City ATHENS	State OH	Zip Code 45701-3738
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021

Transaction ID : SA11A.1748351

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. SWITZER, DONALD, E., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 455 LAUGHBAUM DR.

City GALION	State OH	Zip Code 44833-1037
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2021

Transaction ID : SA11A.1748353

Amount of Each Receipt this Period
200.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	400.00
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 25 OF 60
	<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. TAYLOR, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1695 WESTOVER LN.
 City MANSFIELD State OH Zip Code 44906-3342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAYLOR METAL PRODUCTS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747553
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. WHEELER, JOHN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 WILLOW CIR. #14
 City AURORA State OH Zip Code 44202-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARNEY AND BROADBENT Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 14 / 2021
Transaction ID : SA11A.1748364
 Amount of Each Receipt this Period 450.00
 Memo Item CONTRIBUTION

C. YOUNG, ROBERT, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4125 CARLISLE AVE NE
 City CANTON State OH Zip Code 44714-1233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YOUNG TRUCK SALES, INC. Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747919
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1700.00
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 26 OF 60
	<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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. ZEITER, CONSTANCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8670 COUNTY RD. S.
 City LIBERTY CENTER State OH Zip Code 43532-9771
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747985
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. ZIMMERMAN, JANET, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7469 S.R. 754
 City SHREVE State OH Zip Code 44676-9411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11A.1747310
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. ZIMMERMAN, JANET, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7469 S.R. 754
 City SHREVE State OH Zip Code 44676-9411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General
 Other (specify) Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2021
Transaction ID : SA11A.1748375
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	51626.00

**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 27 OF 60
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. STIVERS FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4679 WINTERSET DRIVE

City COLUMBUS	State OH	Zip Code 43220-8113
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00441352

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39478.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2021

Transaction ID : SA11A.1748084

Amount of Each Receipt this Period
39478.98

Memo Item
STAFF REIMBURSEMENT

B. CITY OF COLUMBUS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 90 W. BROAD ST., RM. 109

City COLUMBUS	State OH	Zip Code 43215-9000
------------------	-------------	------------------------

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 ▼
3857.77

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2021

Transaction ID : SA11A.1748425

Amount of Each Receipt this Period
3857.77

Memo Item
REFUND OF OVERPAYMENT

C. THE STONERIDGE GROUP LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 960 N POINT PARKWAY, STE 225

City ALPHARETTA	State GA	Zip Code 30005-9020
--------------------	-------------	------------------------

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 ▼
18231.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2021

Transaction ID : SA11A.1748076

Amount of Each Receipt this Period
18231.09

Memo Item
REFUND OF OVERPAYMENT

SUBTOTAL of Receipts This Page (optional).....	61567.84
TOTAL This Period (last page this line number only).....	61567.84

**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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial) A. CHURCH, LOGAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 23 / 2021	
Mailing Address C/O 211 S. 5TH ST.			
City COLUMBUS	State OH	Zip Code 43215	
Purpose of Disbursement VOIDED: PD BY ANOTHER CHECK		FEC Identification Number C	
Candidate Name		Transaction ID : SB21B.I2377 Amount of Each Disbursement this Period - 484.22	
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. DAINS, THOMAS, , , JR.		Date of Disbursement MM / DD / YYYY 03 / 23 / 2021	
Mailing Address C/O 211 S. 5TH ST.			
City COLUMBUS	State OH	Zip Code 43215	
Purpose of Disbursement EXPENSE REIMBURSEMENT		FEC Identification Number C	
Candidate Name		Transaction ID : SB21B.I2377 Amount of Each Disbursement this Period 2656.59	
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. AMAZON		Date of Disbursement MM / DD / YYYY 03 / 20 / 2021	
Mailing Address 410 TERRY AVE N			
City SEATTLE	State WA	Zip Code 98109	
Purpose of Disbursement PARKING SIGNS		FEC Identification Number C	
Candidate Name		Transaction ID : SB21B.I2379 Amount of Each Disbursement this Period 50.21	
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 checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....	2172.37
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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. DOCUSIGN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2021

Mailing Address 221 MAIN STREET
SUITE 100

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
SOFTWARE

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I23784
Amount of Each Disbursement this Period

[REDACTED] 42.70

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. DROPBOX INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2021

Mailing Address 1800 OWENS ST

City SAN FRANCISCO State CA Zip Code 94158

Purpose of Disbursement
SUBSCRIPTION

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I23784
Amount of Each Disbursement this Period

[REDACTED] 11.99

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. IKEA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2021

Mailing Address 1900 IKEA WAY

City COLUMBUS State OH Zip Code 43240

Purpose of Disbursement
OFFICE FURNITURE

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I23784
Amount of Each Disbursement this Period

[REDACTED] 407.63

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

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

[REDACTED] 0.00

[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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 6060 NANCY RIDGE DR

City
SAN DIEGO

State
CA

Zip Code
92121-3218

Purpose of Disbursement
SOFTWARE

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
0	3		0	1		2	0	2	1

FEC Identification Number

C

Transaction ID : SB21B.I2378!

Amount of Each Disbursement this Period

161.25

Memo Item

Full Name (Last, First, Middle Initial)

B. LOWES-COLUMBUS

Mailing Address 2345 SILVER DR.

City
COLUMBUS

State
OH

Zip Code
43211

Purpose of Disbursement
OFFICE FLOORING

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
0	3		1	9		2	0	2	1

FEC Identification Number

C

Transaction ID : SB21B.I2378!

Amount of Each Disbursement this Period

154.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MENARDS

Mailing Address 1425 ETY RD.

City
LANCASTER

State
OH

Zip Code
43130

Purpose of Disbursement
OFFICE CABINETS

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
0	3		1	9		2	0	2	1

FEC Identification Number

C

Transaction ID : SB21B.I2378!

Amount of Each Disbursement this Period

1434.08

Memo Item

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

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

0.00

--

**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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. SAM'S CLUB

Mailing Address P.O. BOX 9001152

City
LOUISVILLE

State
KY

Zip Code
40290-1152

Purpose of Disbursement
OFFICE FURNITURE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I2378:
Amount of Each Disbursement this Period

107.23

Memo Item

Full Name (Last, First, Middle Initial)

B. STRONG ASSET TAGS

Mailing Address 4255 US HIGHWAY 1

City
ST AUGUSTINE

State
FL

Zip Code
32086

Purpose of Disbursement
ASSET TAGS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I23791
Amount of Each Disbursement this Period

287.50

Memo Item

Full Name (Last, First, Middle Initial)

C. SIMS, PAIGE, , ,

Mailing Address C/O 211 S 5TH STREET

City
COLUMBUS

State
OH

Zip Code
43215

Purpose of Disbursement
MILEAGE & EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I2377
Amount of Each Disbursement this Period

772.78

Memo Item

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

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

772.78

**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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. LOWES-COLUMBUS

Mailing Address 2345 SILVER DR.

City
COLUMBUS

State
OH

Zip Code
43211

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2378'

Amount of Each Disbursement this Period

[REDACTED] 104.78

Memo Item

Full Name (Last, First, Middle Initial)

B. STAPLES-EASTON

Mailing Address 3737 EASTON MARKET

City
COLUMBUS

State
OH

Zip Code
43219

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I23782

Amount of Each Disbursement this Period

[REDACTED] 43.06

Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 850 TWIN RIVERS DR

City
COLUMBUS

State
OH

Zip Code
43216

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	15	/	2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2378

Amount of Each Disbursement this Period

[REDACTED] 495.00

Memo Item

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

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

[REDACTED] 0.00

[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)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET
SUITE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 08 / 2021

FEC Identification Number C

Transaction ID : SB21B.I2374

Amount of Each Disbursement this Period 0.45

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET
SUITE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 12 / 2021

FEC Identification Number C

Transaction ID : SB21B.I2374

Amount of Each Disbursement this Period 1.05

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS STREET
SUITE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 22 / 2021

FEC Identification Number C

Transaction ID : SB21B.I2374

Amount of Each Disbursement this Period 3.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4.80

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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS STREET
SUITE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2374I

Amount of Each Disbursement this Period

[REDACTED] 1.81

Memo Item

Full Name (Last, First, Middle Initial)

B. HUNTINGTON NATIONAL BANK

Mailing Address 41 SOUTH HIGH ST

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2374I

Amount of Each Disbursement this Period

[REDACTED] 34.90

Memo Item

Full Name (Last, First, Middle Initial)

C. HUNTINGTON NATIONAL BANK

Mailing Address 41 SOUTH HIGH ST

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2374I

Amount of Each Disbursement this Period

[REDACTED] 18.00

Memo Item

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

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

[REDACTED] 54.71

[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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. HUNTINGTON NATIONAL BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2021

Mailing Address 41 SOUTH HIGH ST

City COLUMBUS	State OH	Zip Code 43215
------------------	-------------	-------------------

FEC Identification Number

C

Purpose of Disbursement
BANK FEE

Transaction ID : SB21B.I2374!

Candidate Name

Amount of Each Disbursement this Period

187.18

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) ▼	

Category/
Type

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. HUNTINGTON NATIONAL BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2021

Mailing Address 41 SOUTH HIGH ST

City COLUMBUS	State OH	Zip Code 43215
------------------	-------------	-------------------

FEC Identification Number

C

Purpose of Disbursement
BANK FEE

Transaction ID : SB21B.I2375C

Candidate Name

Amount of Each Disbursement this Period

5.00

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) ▼	

Category/
Type

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. HUNTINGTON NATIONAL BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2021

Mailing Address 41 SOUTH HIGH ST

City COLUMBUS	State OH	Zip Code 43215
------------------	-------------	-------------------

FEC Identification Number

C

Purpose of Disbursement
BANK FEE

Transaction ID : SB21B.I2375

Candidate Name

Amount of Each Disbursement this Period

5.00

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) ▼	

Category/
Type

Memo Item

State: District:

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

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

197.18

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**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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. HUNTINGTON NATIONAL BANK

Mailing Address 41 SOUTH HIGH ST

City
COLUMBUS

State
OH

Zip Code
43215

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	15	/	2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2375
Amount of Each Disbursement this Period

[REDACTED] 5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HUNTINGTON NATIONAL BANK

Mailing Address 41 SOUTH HIGH ST

City
COLUMBUS

State
OH

Zip Code
43215

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	15	/	2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2375
Amount of Each Disbursement this Period

[REDACTED] 5.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ISTREAM

Mailing Address 13555 BISHOPS CT #102

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
CHECK PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	03	/	2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2375
Amount of Each Disbursement this Period

[REDACTED] 27.71

Memo Item

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

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

[REDACTED] 37.71

[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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. ISTREAM

Mailing Address 13555 BISHOPS CT #102

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
CHECK PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	03	/	2021

FEC Identification Number

C []
Transaction ID : SB21B.I2375!
Amount of Each Disbursement this Period
[] 12.45

Memo Item

Full Name (Last, First, Middle Initial)

B. ISTREAM

Mailing Address 13555 BISHOPS CT #102

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
CHECK PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	03	/	2021

FEC Identification Number

C []
Transaction ID : SB21B.I2375!
Amount of Each Disbursement this Period
[] 111.72

Memo Item

Full Name (Last, First, Middle Initial)

C. ISTREAM

Mailing Address 13555 BISHOPS CT #102

City
BROOKFIELD

State
WI

Zip Code
53005

Purpose of Disbursement
CHECK PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	08	/	2021

FEC Identification Number

C []
Transaction ID : SB21B.I2375!
Amount of Each Disbursement this Period
[] 15.00

Memo Item

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

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

[] 139.17

[]

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)

Grid for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Form A: ISTREAM. Includes fields for Full Name, Mailing Address (13555 BISHOPS CT #102), City (BROOKFIELD), State (WI), Zip Code (53005), Purpose of Disbursement (CHECK PROCESSING FEE), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/03/2021), FEC Identification Number, Transaction ID (SB21B.I2375), Amount of Each Disbursement (12.45), and Memo Item checkbox.

Form B: MERCHANT SERVICES. Includes fields for Full Name, Mailing Address (MAIL DROP 1MOC3D), City (CINCINNATI), State (OH), Zip Code (45263), Purpose of Disbursement (CREDIT CARD PROCESSING FEE), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/01/2021), FEC Identification Number, Transaction ID (SB21B.I2375), Amount of Each Disbursement (25.00), and Memo Item checkbox.

Form C: STRIPE. Includes fields for Full Name, Mailing Address (3180 18TH ST.), City (SAN FRANCISCO), State (CA), Zip Code (94110), Purpose of Disbursement (CREDIT CARD PROCESSING FEE), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (03/09/2021), FEC Identification Number, Transaction ID (SB21B.I2376), Amount of Each Disbursement (76.74), and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) 114.19
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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH ST.

City
SAN FRANCISCO

State
CA

Zip Code
94110

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2376

Amount of Each Disbursement this Period

[REDACTED] 136.27

Memo Item

Full Name (Last, First, Middle Initial)

B. THE CINCINNATI INSURANCE COMPANY

Mailing Address PO BOX 145620

City
CINCINNATI

State
OH

Zip Code
45250

Purpose of Disbursement
LIABILITY INSURANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2376

Amount of Each Disbursement this Period

[REDACTED] 2577.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
WI

Zip Code
22219

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2376

Amount of Each Disbursement this Period

[REDACTED] 1.25

Memo Item

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

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

[REDACTED] 2714.52

[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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
WI

Zip Code
22219

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I2376!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
WI

Zip Code
22219

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I2376!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
WI

Zip Code
22219

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I2376!
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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
WI

Zip Code
22219

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2376i

Amount of Each Disbursement this Period

[REDACTED] 1.38

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
WI

Zip Code
22219

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2376i

Amount of Each Disbursement this Period

[REDACTED] 3.75

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
WI

Zip Code
22219

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2377

Amount of Each Disbursement this Period

[REDACTED] 3.09

Memo Item

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

[REDACTED] 8.22

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

[REDACTED] 6232.76

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 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 checked="" type="checkbox"/> 30b

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)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. CROTTY, LARA, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		05		2021

Mailing Address C/O 211 S FIFTH ST

City COLUMBUS	State OH	Zip Code 43215
------------------	-------------	-------------------

Purpose of Disbursement
PAYROLL, TAXES & FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2377
Amount of Each Disbursement this Period

[REDACTED] 4967.09

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. CROTTY, LARA, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2021

Mailing Address C/O 211 S FIFTH ST

City COLUMBUS	State OH	Zip Code 43215
------------------	-------------	-------------------

Purpose of Disbursement
PAYROLL, TAXES & FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2377
Amount of Each Disbursement this Period

[REDACTED] 4973.61

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. POLLOCK, SAMANTHA, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		05		2021

Mailing Address C/O 211 S FIFTH ST

City COLUMBUS	State OH	Zip Code 43215
------------------	-------------	-------------------

Purpose of Disbursement
PAYROLL, TAXES & FEES

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B.I2377
Amount of Each Disbursement this Period

[REDACTED] 1695.41

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

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

[REDACTED] 11636.11

[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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. POLLOCK, SAMANTHA, , ,

Mailing Address C/O 211 S FIFTH ST

City
COLUMBUS

State
OH

Zip Code
43215

Purpose of Disbursement
PAYROLL, TAXES & FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2377
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. SIMS, PAIGE, , ,

Mailing Address C/O 211 S 5TH STREET

City
COLUMBUS

State
OH

Zip Code
43215

Purpose of Disbursement
PAYROLL, TAXES & FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2377
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. SIMS, PAIGE, , ,

Mailing Address C/O 211 S 5TH STREET

City
COLUMBUS

State
OH

Zip Code
43215

Purpose of Disbursement
PAYROLL, TAXES & FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30B.I2377
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. SIMS, PAIGE, , ,

Mailing Address C/O 211 S 5TH STREET

City
COLUMBUS

State
OH

Zip Code
43215

Purpose of Disbursement
PAYROLL, TAXES & FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	1

FEC Identification Number

C []

Transaction ID : SB30B.I2377!

Amount of Each Disbursement this Period

[] 1769.85

Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED HEALTH CARE INSURANCE

Mailing Address COMPANY OF THE RIVER VALLEY
22070 NETWORK PL

City
CHICAGO

State
IL

Zip Code
60673-1220

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : SB21B.I2376!

Amount of Each Disbursement this Period

[] 19995.49

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

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)..... ▶

[] 21765.34

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

[] 39222.61

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 45 OF 60
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ActRight Engagement			Nature of Debt (Purpose): Party hdq-web site updates-not candid sp
Mailing Address 2029 K St. NW, Suite 300			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 1762.50	Transaction ID : SchD.1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1762.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ActRight Engagement			Nature of Debt (Purpose): Web site updates
Mailing Address 2029 K St. NW, Ste 300			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 2673.00	Transaction ID : SchD.2	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2673.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ActRight Engagement			Nature of Debt (Purpose): Website hosting and maintenance fees
Mailing Address 2029 K St. NW, Ste 300			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 1575.00	Transaction ID : SchD.3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1575.00

1) SUBTOTALS This Period This Page (optional)..... ▶	6010.50
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 46 OF 60
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express			Nature of Debt (Purpose): Late fees
Mailing Address Box 0001			
City Los Angeles	State CA	Zip Code 90096-8000	

Outstanding Balance Beginning This Period <input type="text" value="1531.70"/>	Transaction ID : SchD.4	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1531.70"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express			Nature of Debt (Purpose): Credit card bill
Mailing Address Box 0001			
City Los Angeles	State CA	Zip Code 90096-8000	

Outstanding Balance Beginning This Period <input type="text" value="6345.51"/>	Transaction ID : SchD.5	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6345.51"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Express			Nature of Debt (Purpose): Credit card bill
Mailing Address Box 0001			
City Los Angeles	State CA	Zip Code 90096-8000	

Outstanding Balance Beginning This Period <input type="text" value="50773.11"/>	Transaction ID : SchD.6	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="50773.11"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="58650.32"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 47 OF 60
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ohio Convention Committee 2016			Nature of Debt (Purpose): Expenses related to delegates attending
Mailing Address 2168 SUTTER PKWY			
City Dublin	State OH	Zip Code 43016	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : 123	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oxford Communications			Nature of Debt (Purpose): Pty hdq operations telemarketing fundrai
Mailing Address 121 S. Alfred St.			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 7947.45	Transaction ID : SchD.21	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7947.45

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oxford Communications			Nature of Debt (Purpose): Pty hdq operations telemarketing fundrai
Mailing Address 121 S. Alfred St.			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 15162.00	Transaction ID : SchD.22	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15162.00

1) SUBTOTALS This Period This Page (optional)..... ▶	28109.45
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 48 OF 60
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oxford Communications			Nature of Debt (Purpose): Pty operations fundraising- telemarketin
Mailing Address 121 S. Alfred St.			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="3234.20"/>	Transaction ID : SchD.23	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3234.20"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oxford Communications			Nature of Debt (Purpose): pty operations fundraising-telemarketing
Mailing Address 121 S. Alfred St.			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="1448.16"/>	Transaction ID : SchD.24	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1448.16"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oxford Communications			Nature of Debt (Purpose): pty operations fundraising-telemarketing
Mailing Address 121 S. Alfred St.			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="895.00"/>	Transaction ID : SchD.25	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="895.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="5577.36"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 49 OF 60
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oxford Communications			Nature of Debt (Purpose): pty operations fundraising-telemarketing
Mailing Address 121 S. Alfred St.			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 1177.00	Transaction ID : SchD.26	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1177.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oxford Communications			Nature of Debt (Purpose): Pty operations fundraising- telemarketin
Mailing Address 121 S. Alfred St.			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 1320.00	Transaction ID : SchD.27	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1320.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oxford Communications			Nature of Debt (Purpose): Pty operations fundraising telemarketing
Mailing Address 121 S. Alfred St.			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 1755.00	Transaction ID : SchD.29	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1755.00

1) SUBTOTALS This Period This Page (optional)..... ▶	4252.00
2) TOTALS This Period (last page this line number only)..... ▶	102599.63
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	102599.63

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)**
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)**

NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Transaction ID : 041921A

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Indicate ratio below

Federal..... %

Nonfederal %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23722** Memo Item
INTUIT PAYMENT SYSTEM
Mailing Address 71 STEVENSON STREET, SUITE 900

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement: SOFTWARE

Activity or Event Identifier: **ADMINISTRATIVE**

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 121384.29

Date: 03 / 02 / 2021

Category/Type: 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.19		15.76		19.95

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23725** Memo Item
ARNOLD, GARRETT, , ,
Mailing Address C/O 211 S FIFTH ST

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement: PAYROLL, TAXES & FEES

Activity or Event Identifier: **ADMINISTRATIVE**

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 124306.93

Date: 03 / 05 / 2021

Category/Type: 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
613.75		2308.89		2922.64

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23726** Memo Item
BIS, JUSTIN, , ,
Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement: PAYROLL, TAXES & FEES

Activity or Event Identifier: **ADMINISTRATIVE**

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 126667.73

Date: 03 / 05 / 2021

Category/Type: 001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
495.77		1865.03		2360.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1113.71		4189.68		5303.39

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.23727 Memo Item
DAINS, THOMAS, , , JR.
Mailing Address C/O 211 S. 5TH ST.
City COLUMBUS State OH Zip Code 43215
Purpose of Disbursement: PAYROLL, TAXES & FEES
Activity or Event Identifier: ADMNISTRATIVE
Category/Type 001
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 129176.33
Date 03 / 05 / 2021
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
526.81 + 1981.79 = 2508.60

B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.23728 Memo Item
HART, MADELINE, , ,
Mailing Address C/O 211 S 5TH STREET
City COLUMBUS State OH Zip Code 43215
Purpose of Disbursement: PAYROLL, TAXES & FEES
Activity or Event Identifier: ADMNISTRATIVE
Category/Type 001
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 131086.85
Date 03 / 05 / 2021
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
401.21 + 1509.31 = 1910.52

C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.23729 Memo Item
MACHAN, EVAN, , ,
Mailing Address C/O 211 S 5TH STREET
City COLUMBUS State OH Zip Code 43215
Purpose of Disbursement: PAYROLL, TAXES & FEES
Activity or Event Identifier: ADMNISTRATIVE
Category/Type 001
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 137073.36
Date 03 / 05 / 2021
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
1257.17 + 4729.34 = 5986.51

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2185.19		8220.44		10405.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23730** Memo Item
MORRIS, HENRY, , ,
Mailing Address C/O 211 S 5TH STREET

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement: PAYROLL, TAXES & FEES

Activity or Event Identifier: **ADMNISTRATIVE**

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 138793.73

Date: 03 / 05 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
361.28		1359.09		1720.37

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23731** Memo Item
SECAUR, ROBERT, , ,
Mailing Address C/O 211 S 5TH STREET

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement: PAYROLL, TAXES & FEES

Activity or Event Identifier: **ADMNISTRATIVE**

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 144588.65

Date: 03 / 05 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1216.93		4577.99		5794.92

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23732** Memo Item
THOMPSON, DREW, , ,
Mailing Address C/O 211 S. FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement: PAYROLL, TAXES & FEES

Activity or Event Identifier: **ADMNISTRATIVE**

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 150135.52

Date: 03 / 05 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1164.84		4382.03		5546.87

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2743.05		10319.11		13062.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.23733 Memo Item
TULLEY, MITCHELL, , ,
Mailing Address C/O 211 S 5TH STREET

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement: PAYROLL, TAXES & FEES

Activity or Event Identifier: ADMNISTRATIVE

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 152353.89

Date: 03 / 05 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
465.86		1752.51		2218.37

B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.23734 Memo Item
WHITMARSH, ELIZABETH, , ,
Mailing Address C/O 211 SOUTH FIFTH ST.

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement: PAYROLL, TAXES & FEES

Activity or Event Identifier: ADMNISTRATIVE

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 154264.41

Date: 03 / 05 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
401.21		1509.31		1910.52

C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.23720 Memo Item
CMDI
Mailing Address 1593 SPRING HILL RD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement: DATABASE SOFTWARE

Activity or Event Identifier: ADMNISTRATIVE

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 154776.53

Date: 03 / 09 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.55		404.57		512.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
974.62		3666.39		4641.01

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23724** Memo Item
MICROSOFT OFFICE 365
Mailing Address 6100 NEIL RD, #100 #100
City RENO State NV Zip Code 89511
Purpose of Disbursement: SOFTWARE
Activity or Event Identifier: **ADMNISTRATIVE**
Category/Type: 001
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 154839.31
Date: 03 / 15 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.18		49.60		62.78

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23721** Memo Item
CMDI
Mailing Address 1593 SPRING HILL RD, STE 400
City TYSONS CORNER State VA Zip Code 22182
Purpose of Disbursement: DATABASE SOFTWARE
Activity or Event Identifier: ADMNISTRATIVE
Category/Type: 001
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 155789.31
Date: 03 / 17 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
199.50		750.50		950.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23735** Memo Item
ARNOLD, GARRETT, , ,
Mailing Address C/O 211 S FIFTH ST
City COLUMBUS State OH Zip Code 43215
Purpose of Disbursement: PAYROLL, TAXES & FEES
Activity or Event Identifier: ADMNISTRATIVE
Category/Type: 001
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 158718.47
Date: 03 / 19 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
615.12		2314.04		2929.16

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
827.80		3114.14		3941.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23736** Memo Item
BIS, JUSTIN, , ,
Mailing Address C/O 211 S. FIFTH ST.
City COLUMBUS State OH Zip Code 43215
Purpose of Disbursement: PAYROLL, TAXES & FEES
Activity or Event Identifier: **ADMNISTRATIVE**
Category/Type: 001
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 163422.25
Date: 03 / 19 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
987.79		3715.99		4703.78

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23737** Memo Item
DAINS, THOMAS, , , JR.
Mailing Address C/O 211 S. 5TH ST.
City COLUMBUS State OH Zip Code 43215
Purpose of Disbursement: PAYROLL, TAXES & FEES
Activity or Event Identifier: **ADMNISTRATIVE**
Category/Type: 001
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 165937.38
Date: 03 / 19 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
528.18		1986.95		2515.13

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23738** Memo Item
FISHER, KEVIN, , ,
Mailing Address C/O 211 SOUTH FIFTH STREET
City COLUMBUS State OH Zip Code 43215
Purpose of Disbursement: PAYROLL, TAXES & FEES
Activity or Event Identifier: **ADMNISTRATIVE**
Category/Type: 001
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 166817.89
Date: 03 / 19 / 2021

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
184.91		695.60		880.51

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1700.88		6398.54		8099.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Form A: Full Name (Last, First, Middle Initial) Transaction ID : SB21A.23739. HART, MADELINE, , ,. Mailing Address C/O 211 S 5TH STREET. City COLUMBUS, State OH, Zip Code 43215. Purpose of Disbursement: PAYROLL, TAXES & FEES. Activity or Event Identifier: ADMNISTRATIVE. Allocated Activity or Event: Administrative (checked). Allocated Activity or Event Year-To-Date: 167695.75. Date: 03/19/2021. Summary: FEDERAL SHARE 184.35 + NONFEDERAL SHARE 693.51 = TOTAL AMOUNT 877.86

Form B: Full Name (Last, First, Middle Initial) Transaction ID : SB21A.23740. MORRIS, HENRY, , ,. Mailing Address C/O 211 S 5TH STREET. City COLUMBUS, State OH, Zip Code 43215. Purpose of Disbursement: PAYROLL, TAXES & FEES. Activity or Event Identifier: ADMNISTRATIVE. Allocated Activity or Event: Administrative (checked). Allocated Activity or Event Year-To-Date: 169414.94. Date: 03/19/2021. Summary: FEDERAL SHARE 361.03 + NONFEDERAL SHARE 1358.16 = TOTAL AMOUNT 1719.19

Form C: Full Name (Last, First, Middle Initial) Transaction ID : SB21A.23741. TULLEY, MITCHELL, , ,. Mailing Address C/O 211 S 5TH STREET. City COLUMBUS, State OH, Zip Code 43215. Purpose of Disbursement: PAYROLL, TAXES & FEES. Activity or Event Identifier: ADMNISTRATIVE. Allocated Activity or Event: Administrative (checked). Allocated Activity or Event Year-To-Date: 170532.68. Date: 03/19/2021. Summary: FEDERAL SHARE 234.73 + NONFEDERAL SHARE 883.01 = TOTAL AMOUNT 1117.74

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 780.11, 2934.68, 3714.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23742** Memo Item
WHITMARSH, ELIZABETH, , ,
 Mailing Address C/O 211 SOUTH FIFTH ST.
 City COLUMBUS State OH Zip Code 43215
 Purpose of Disbursement: PAYROLL, TAXES & FEES
 Activity or Event Identifier: **ADMNISTRATIVE**
 Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
 Allocated Activity or Event Year-To-Date: 172255.54
 Date: 03 / 19 / 2021
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 361.80 + 1361.06 = 1722.86

B. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23723** Memo Item
LYCURGUS GROUP, LLC
 Mailing Address 222 E TOWN STREET STE 2W
 City COLUMBUS State OH Zip Code 43215
 Purpose of Disbursement: OFFICE SECURITY
 Activity or Event Identifier: **ADMNISTRATIVE**
 Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
 Allocated Activity or Event Year-To-Date: 173005.54
 Date: 03 / 23 / 2021
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 157.50 + 592.50 = 750.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : SB21A.23719** Memo Item
BILL.COM
 Mailing Address 1800 EMBARCADERO ROAD
 City PALO ALTO State CA Zip Code 94303
 Purpose of Disbursement: SOFTWARE
 Activity or Event Identifier: **ADMNISTRATIVE**
 Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
 Allocated Activity or Event Year-To-Date: 173153.90
 Date: 03 / 26 / 2021
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 31.16 + 117.20 = 148.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
550.46		2070.76		2621.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
10875.82	40913.74	51789.56

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID : 123456

NAME OF COMMITTEE (In Full)		
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE		
NAME OF ACCOUNT		
Ohio Republican Party Levin Account		
	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized (Use Schedule L-A)	0.00	0.00
(b) Unitemized	0.00	0.00
(c) Total	0.00	0.00
2. OTHER RECEIPTS	0.00	0.00
3. TOTAL RECEIPTS	0.00	0.00
(Add Lines 1c and 2)		
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration	0.00	0.00
(b) Voter ID	0.00	0.00
(c) GOTV	0.00	0.00
(d) Generic Campaign	0.00	0.00
(e) Total	0.00	0.00
5. OTHER DISBURSEMENTS	5.00	15.00
6. TOTAL DISBURSEMENTS	5.00	15.00
(Add Lines 4e and 5)		
7. BEGINNING CASH ON HAND	8172.93	8182.93
(for Column B, use cash as of January 1st)		
8. RECEIPTS	0.00	0.00
(from Line 3)		
9. SUBTOTAL	8172.93	8182.93
(Add Lines 7 and 8)		
10. DISBURSEMENTS	5.00	15.00
(From Line 6)		
11. ENDING CASH ON HAND	8167.93	8167.93
(Subtract Line 10 From Line 9)		

SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS

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

FOR LINE NUMBER: PAGE 60 OF 60
(check only one) 4a 4c 5
 4b 4d

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NAME OF COMMITTEE (In Full)
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

A. HUNTINGTON NATIONAL BANK Memo Item

Full Name (Last, First, Middle Initial) / Full Organization Name

Mailing Address 41 SOUTH HIGH ST

City COLUMBUS	State OH	Zip Code 43215
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Purpose of Disbursement
BANK FEE

Date of Disbursement
MM / DD / YYYY
03 / 15 / 2021

Transaction ID : SB21B.I23751_B

Amount of Each Disbursement this Period
5.00

Account : 1234

B. Memo Item

Full Name (Last, First, Middle Initial) / Full Organization Name

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Account :

C. Memo Item

Full Name (Last, First, Middle Initial) / Full Organization Name

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Account :

D. Memo Item

Full Name (Last, First, Middle Initial) / Full Organization Name

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Account :

E. Memo Item

Full Name (Last, First, Middle Initial) / Full Organization Name

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Account :

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5.00

TOTAL This Period (last page this line number only)..... ▶ 5.00