

# 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**  
Cincinnatus PAC

ADDRESS (number and street) 225 W Court St  
Check if different than previously reported. (ACC) Cincinnati OH 45202

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00574228 3. IS THIS REPORT NEW (N) OR AMENDED (A)  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 M M M / D D D / Y Y Y Y Y Y in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2017 through 06 / 30 / 2017

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

Signature of Treasurer Callan, Sean, P., , [Electronically Filed] Date 04 / 10 / 2018

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)

Page 2

Write or Type Committee Name

**Cincinnatus PAC**

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="2017"/>	<input type="text" value="15815.60"/>	<input type="text" value="15815.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15815.60"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="43350.00"/>	<input type="text" value="43350.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="59165.60"/>	<input type="text" value="59165.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="49187.52"/>	<input type="text" value="49187.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9978.08"/>	<input type="text" value="9978.08"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Cincinnatus PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	40500.00	40500.00
(ii) Unitemized .....	450.00	450.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	40950.00	40950.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2400.00	2400.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	43350.00	43350.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	43350.00	43350.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	43350.00	43350.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	40337.52	40337.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	40337.52	40337.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
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 .....	1000.00	1000.00
(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)).....	1000.00	1000.00
29. Other Disbursements (Including Non-Federal Donations).....	6850.00	6850.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	49187.52	49187.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49187.52	49187.52

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	43350.00	43350.00
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	42350.00	42350.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	40337.52	40337.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	40337.52	40337.52

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)  
**Cincinnatus PAC**

**A. Ambrose BD, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 315 Greenup St  
 City Covington State KY Zip Code 41011  
 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 ▼ 1100.00

Date of Receipt 06 / 30 / 2017  
**Transaction ID : SA11AI.4835**  
 Amount of Each Receipt this Period 1100.00  
 Memo Item  
 Partnership Contribution - Ben Klopp

**B. B&J Development, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 212 E 3rd St, #300  
 City Cincinnati State OH Zip Code 45202  
 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 ▼ 2000.00

Date of Receipt 01 / 03 / 2017  
**Transaction ID : SA11AI.4766**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item  
 Tom Williams - Partnership Attribution

**C. Barret, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9300 Shawnee Run Rd  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Homemaker Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 01 / 03 / 2017  
**Transaction ID : SA11AI.4781**  
 Amount of Each Receipt this Period 1100.00  
 Memo Item  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4200.00
<b>TOTAL</b> 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 7 OF 48
<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)  
**Cincinnatus PAC**

**A. Byer, Burke, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9270 Old Indian Hill Rd  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Byer Steele Occupation (for Individual) Sales  
 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  
 04 / 04 / 2017  
**Transaction ID : SA11AI.4811**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item Contribution

**B. Caller, Brett, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8125 Manor Hill Lane  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Viking Properties Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 27 / 2017  
**Transaction ID : SA11AI.4828**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**C. Cicchinelli, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8675 Blome Rd  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pure Romance Occupation (for Individual) Executive  
 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  
 01 / 09 / 2017  
**Transaction ID : SA11AI.4770**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 48
	<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)  
**Cincinnatus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Deters, Daniel, , ,</b>			Date of Receipt
Mailing Address 5814 Ravens Ridge			<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2017"/>
City Cincinnati	State OH	Zip Code 45247	<b>Transaction ID : SA11AI.4772</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="450.00"/>
Name of Employer (for Individual) Energy Alliance		Occupation (for Individual) Executive	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ernst, Jerry, , , Jr.</b>			Date of Receipt
Mailing Address 3028 Kinmont St			<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>
City Cincinnati	State OH	Zip Code 45208	<b>Transaction ID : SA11AI.4779</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) Ernst Auto Body		Occupation (for Individual) Owner	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Fisher, Robert, , ,</b>			Date of Receipt
Mailing Address 2635 Section Rd			<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2017"/>
City Cincinnati	State OH	Zip Code 45237	<b>Transaction ID : SA11AI.4803</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="1100.00"/>
Name of Employer (for Individual) Washing Systems, LLC		Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1800.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 48
	<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)  
**Cincinnatus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Friends of Ginther</b>		Date of Receipt
Mailing Address 545 E Town St		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2017"/>
City Columbus	State OH	Zip Code 43215
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4806</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Garretson, Matt, , ,</b>		Date of Receipt
Mailing Address 9200 Shawnee Run		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2017"/>
City Cincinnati	State OH	Zip Code 45243
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4777</b>
Name of Employer (for Individual) Garretson Resolution Group		Amount of Each Receipt this Period <input type="text" value="2000.00"/>
Occupation (for Individual) Attorney		<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. James, Evan, , ,</b>		Date of Receipt
Mailing Address 301 E 4th St, 40th Floor		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City Cincinnati	State OH	Zip Code 45202
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.4794</b>
Name of Employer (for Individual) American Financial		Amount of Each Receipt this Period <input type="text" value="1100.00"/>
Occupation (for Individual) General Counsel		<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1100.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="8100.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 48
	<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)  
**Cincinnatus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Joseph, Marcia, , ,</b>			Date of Receipt MM / DD / YYYY 02 / 16 / 2017
Mailing Address 1116 Leafree Ct			<b>Transaction ID : SA11AI.4786</b>
City Cincinnati	State OH	Zip Code 45208	Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Unemployed		Occupation (for Individual) Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Joseph, Marcia, , ,</b>			Date of Receipt MM / DD / YYYY 03 / 24 / 2017
Mailing Address 1116 Leafree Ct			<b>Transaction ID : SA11AI.4808</b>
City Cincinnati	State OH	Zip Code 45208	Amount of Each Receipt this Period 1100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Unemployed		Occupation (for Individual) Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Joseph, Ronald, , ,</b>			Date of Receipt MM / DD / YYYY 02 / 13 / 2017
Mailing Address 250 E 5th St, #285			<b>Transaction ID : SA11AI.4783</b>
City Cincinnati	State OH	Zip Code 45202	Amount of Each Receipt this Period 1100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Joseph Toyota		Occupation (for Individual) Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5200.00
<b>TOTAL</b> 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 48
	<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)  
**Cincinnatus PAC**

**A. Joseph, Ronald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 E 5th St, #285  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Joseph Toyota Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 04 / 06 / 2017  
**Transaction ID : SA11AI.4815**  
 Amount of Each Receipt this Period 1100.00  
 Memo Item Contribution

**B. LaRosa, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2334 Boudinot Ave  
 City Cincinnati State OH Zip Code 45238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LaRosas Eateries Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 22 / 2017  
**Transaction ID : SA11AI.4787**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

**C. Lindner, Craig, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 E 4th St, 27th Floor  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Great American Insurance Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 02 / 2017  
**Transaction ID : SA11AI.4797**  
 Amount of Each Receipt this Period 1100.00  
 Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional).....▶ 2700.00  
**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 48
<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)  
**Cincinnatus PAC**

**A. Lindner, Craig, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 E 4th St, 27th Floor

City Cincinnati	State OH	Zip Code 45202
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Great American Insurance	Occupation (for Individual) Executive
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2017

**Transaction ID : SA11AI.4833**

Amount of Each Receipt this Period  
1300.00

Memo Item Contribution

**B. Lindner, Edith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 358

City Cincinnati	State OH	Zip Code 45201
--------------------	-------------	-------------------

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 ▼  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2017

**Transaction ID : SA11AI.4813**

Amount of Each Receipt this Period  
1100.00

Memo Item Contribution

**C. Lindner, Edith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 358

City Cincinnati	State OH	Zip Code 45201
--------------------	-------------	-------------------

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 ▼  
3100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2017

**Transaction ID : SA11AI.4834**

Amount of Each Receipt this Period  
2000.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4400.00
<b>TOTAL</b> 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 48
	<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)  
**Cincinnatus PAC**

**A. Lindner, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 E 4th Street, 27th Floor  
 City Cincinnati State OH Zip Code 45202  
 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 ▼ 1100.00

Date of Receipt **03 / 02 / 2017**  
**Transaction ID : SA11AI.4799**  
 Amount of Each Receipt this Period 1100.00  
 Memo Item Contribution

**B. Mahon, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Twin Hills Ridge Dr  
 City Cincinnati State OH Zip Code 45230  
 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 ▼ 250.00

Date of Receipt **02 / 13 / 2017**  
**Transaction ID : SA11AI.4784**  
 Amount of Each Receipt this Period 250.00  
 Memo Item Contribution

**C. Mechley, Braden, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 670 Windings Lane  
 City Cincinnati State OH Zip Code 45220  
 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 ▼ 1100.00

Date of Receipt **03 / 06 / 2017**  
**Transaction ID : SA11AI.4801**  
 Amount of Each Receipt this Period 1100.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2450.00
<b>TOTAL</b> 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 48
	<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)  
**Cincinnatus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Merchant, John, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 17 / 2017
Mailing Address 4156 Allenhurst Close		<b>Transaction ID : SA11AI.4824</b>
City Cincinnati	State OH	Zip Code 45241
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer (for Individual) Dinsmore	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Miller, Jim, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 14 / 2017
Mailing Address 6 Grandin Lane		<b>Transaction ID : SA11AI.4822</b>
City Cincinnati	State OH	Zip Code 45208
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1100.00
Name of Employer (for Individual) Bartlet	Occupation (for Individual) Advisor	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Neyer, John, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 04 / 2017
Mailing Address 430 West Cliff Lane		<b>Transaction ID : SA11AI.4809</b>
City Cincinnati	State OH	Zip Code 45220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Neyer Management	Occupation (for Individual) CEO	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1900.00
<b>TOTAL</b> 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 48
	<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)  
**Cincinnatus PAC**

**A. nSixty, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 8852  
 City Cincinnati State OH Zip Code 45208  
 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 **500.00**

Date of Receipt **02 / 27 / 2017**  
**Transaction ID : SA11AI.4793**  
 Amount of Each Receipt this Period **500.00**  
 Memo Item  
 Partnership Attribution - Matt Stephens

**B. Schiff, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Grandin Terrace  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 John J & Thomas Schiff Agency Insurance Agent  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1100.00**

Date of Receipt **01 / 03 / 2017**  
**Transaction ID : SA11AI.4768**  
 Amount of Each Receipt this Period **1100.00**  
 Memo Item  
 Contribution

**C. Stephens, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Po Box 8852  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 nSixty LLC Sales  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt **04 / 12 / 2017**  
**Transaction ID : SA11AI.4820**  
 Amount of Each Receipt this Period **600.00**  
 Memo Item  
 Contribution

**SUBTOTAL** of Receipts This Page (optional)..... **2200.00**  
**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 48
	<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)  
**Cincinnatus PAC**

**A. Tinkler, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7699 Clear Creek Ct  
 City Blacklick State OH Zip Code 43004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kokosing Constnuction Occupation (for Individual) Project Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2017  
**Transaction ID : SA11AI.4826**  
 Amount of Each Receipt this Period  
 1250.00  
 Memo Item Contribution

**B. Woodside, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3460 Oxford Terrace  
 City Cincinnati State OH Zip Code 45220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Frost Bronw Todd Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2017  
**Transaction ID : SA11AI.4818**  
 Amount of Each Receipt this Period  
 550.00  
 Memo Item Contribution

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

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	40500.00



**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 17 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Cincinnatus PAC**

**A. Cincinnati Firefighters Local 48 PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1011 W 8th St

City Cincinnati	State OH	Zip Code 45203
--------------------	-------------	-------------------

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 ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2017

**Transaction ID : SA11C.4796**

Amount of Each Receipt this Period  
400.00

Memo Item  
Contribution from Ohio PAC

**B. Fifth Third Bancorp PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 545 E Town St

City Columbus	State OH	Zip Code 43215
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00290502

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2017

**Transaction ID : SA11C.4831**

Amount of Each Receipt this Period  
2000.00

Memo Item  
Contribution

**C.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2400.00
<b>TOTAL</b> This Period (last page this line number only).....	2400.00

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Cincinnati African American Chamber of Conference</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017
Mailing Address 2945 Gilbert Ave		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4923</b> Amount of Each Disbursement this Period [ ] 1500.00
City Cincinnati	State OH	Zip Code 45206
Purpose of Disbursement Event Costs		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Cincinnati Childrens Hospital</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2017
Mailing Address 3333 Burnet Ave		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5025</b> Amount of Each Disbursement this Period [ ] 600.00
City Cincinnati	State OH	Zip Code 45229
Purpose of Disbursement Party fees/expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Cincinnati Reds</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2017
Mailing Address 100 Joe Nuxhall Way		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5027</b> Amount of Each Disbursement this Period [ ] 3085.00
City Cincinnati	State OH	Zip Code 45202
Purpose of Disbursement Party fees/expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 5185.00
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Cincinnati Reds**

Mailing Address 100 Joe Nuxhall Way

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Tickets

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2017

FEC Identification Number

C  
Transaction ID : **SB21B.4897**  
Amount of Each Disbursement this Period  
425.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Equality Ohio Education Fund**

Mailing Address 118 E Main Suite 100

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
Event ticket

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2017

FEC Identification Number

C  
Transaction ID : **SB21B.5053**  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Expedia**

Mailing Address 333 108th Ave

City Bellevue State WA Zip Code 98004

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2017

FEC Identification Number

C  
Transaction ID : **SB21B.4883**  
Amount of Each Disbursement this Period  
222.07

Memo Item

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

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

897.07

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. First Watch**

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.4903  
Amount of Each Disbursement this Period  
23.07

Memo Item

Full Name (Last, First, Middle Initial)

**B. First Watch**

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.4910  
Amount of Each Disbursement this Period  
30.03

Memo Item

Full Name (Last, First, Middle Initial)

**C. First Watch**

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 18 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.4925  
Amount of Each Disbursement this Period  
30.85

Memo Item

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

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

83.95

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. First Watch</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2017	
Mailing Address 700 Walnut Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4973</b> Amount of Each Disbursement this Period [ ] 30.64 <input type="checkbox"/> Memo Item	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	
Full Name (Last, First, Middle Initial) <b>B. First Watch</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2017	
Mailing Address 700 Walnut Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4977</b> Amount of Each Disbursement this Period [ ] 29.78 <input type="checkbox"/> Memo Item	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	
Full Name (Last, First, Middle Initial) <b>C. First Watch</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017	
Mailing Address 700 Walnut Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4986</b> Amount of Each Disbursement this Period [ ] 35.59 <input type="checkbox"/> Memo Item	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		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:	
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶		[ ] 96.01	
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4968</b> Amount of Each Disbursement this Period [ ] 61.36	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4978</b> Amount of Each Disbursement this Period [ ] 38.10	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5004</b> Amount of Each Disbursement this Period [ ] 33.82	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 133.28
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Jean Robert's Table</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2017
Mailing Address 713 Vine Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4920</b> Amount of Each Disbursement this Period [ ] 42.85
City Cincinnati	State OH	Zip Code 45202
Purpose of Disbursement Stakeholder Meeting		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Jean Robert's Table</b>		Date of Disbursement MM / DD / YYYY 05 / 11 / 2017
Mailing Address 713 Vine Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4955</b> Amount of Each Disbursement this Period [ ] 77.86
City Cincinnati	State OH	Zip Code 45202
Purpose of Disbursement Stakeholder Meeting		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Jean Robert's Table</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2017
Mailing Address 713 Vine Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4958</b> Amount of Each Disbursement this Period [ ] 64.04
City Cincinnati	State OH	Zip Code 45202
Purpose of Disbursement Stakeholder Meeting		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 184.75
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

**A. Jean Robert's Table**

Full Name (Last, First, Middle Initial)

Mailing Address 713 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4989

Amount of Each Disbursement this Period: 42.01

Memo Item

**B. Kincaid, Jay, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1411 Pleasant Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 23 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5007

Amount of Each Disbursement this Period: 3000.00

Memo Item

**C. Kincaid, Jay, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1411 Pleasant Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5032

Amount of Each Disbursement this Period: 3000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6042.01

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)  
**A. Manley Burke LPA**

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 13 / 2017

FEC Identification Number: C  
Transaction ID : **SB21B.4847**  
Amount of Each Disbursement this Period: 700.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Manley Burke LPA**

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 09 / 2017

FEC Identification Number: C  
Transaction ID : **SB21B.4869**  
Amount of Each Disbursement this Period: 700.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Manley Burke LPA**

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 16 / 2017

FEC Identification Number: C  
Transaction ID : **SB21B.4899**  
Amount of Each Disbursement this Period: 700.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2100.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)  
**A. Manley Burke LPA**

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 07 / 2017

FEC Identification Number  
**C**

Transaction ID : **SB21B.4914**

Amount of Each Disbursement this Period  
700.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Manley Burke LPA**

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 08 / 2017

FEC Identification Number  
**C**

Transaction ID : **SB21B.4953**

Amount of Each Disbursement this Period  
700.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Manley Burke LPA**

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 14 / 2017

FEC Identification Number  
**C**

Transaction ID : **SB21B.4988**

Amount of Each Disbursement this Period  
700.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2100.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Morehouse College Cincinnati</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2017	
Mailing Address 3655 Harvey Ave		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5020</b> Amount of Each Disbursement this Period [ ] 1000.00	
City Cincinnati	State OH	Zip Code 45229	Category/Type [ ]
Purpose of Disbursement Party fees		Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) <b>B. Palominos</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2017	
Mailing Address 505 Vine St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4926</b> Amount of Each Disbursement this Period [ ] 190.77	
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]
Purpose of Disbursement Stakeholder Meeting		Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) <b>C. Queen City Radio</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2017	
Mailing Address 222 W 12th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4940</b> Amount of Each Disbursement this Period [ ] 28.00	
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]
Purpose of Disbursement Stakeholder Meeting		Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Memo Item <input type="checkbox"/>	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1218.77
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Queen City Radio**

Mailing Address 222 W 12th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 23 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5000

Amount of Each Disbursement this Period

59.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Rivertown Strategies, LLC**

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 06 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5011

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rivertown Strategies, LLC**

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5017

Amount of Each Disbursement this Period

1500.00

Memo Item

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

3059.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>			Date of Disbursement MM / DD / YYYY 02 / 28 / 2017		
Mailing Address 224 E 8th St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5018</b> Amount of Each Disbursement this Period [ ] 998.42		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Reimbursement for event admission/tickets			Memo Item <input type="checkbox"/>		
Candidate Name			Amount of Each Disbursement this Period [ ] 998.42		
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) ▼		Memo Item <input type="checkbox"/>		
State: District:			Amount of Each Disbursement this Period [ ] 998.42		
Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>			Date of Disbursement MM / DD / YYYY 03 / 02 / 2017		
Mailing Address 224 E 8th St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5019</b> Amount of Each Disbursement this Period [ ] 702.12		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Party expense reimbursement			Memo Item <input type="checkbox"/>		
Candidate Name			Amount of Each Disbursement this Period [ ] 702.12		
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) ▼		Memo Item <input type="checkbox"/>		
State: District:			Amount of Each Disbursement this Period [ ] 702.12		
Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>			Date of Disbursement MM / DD / YYYY 03 / 14 / 2017		
Mailing Address 224 E 8th St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5024</b> Amount of Each Disbursement this Period [ ] 488.67		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Reimbursement for event admission/tickets			Memo Item <input type="checkbox"/>		
Candidate Name			Amount of Each Disbursement this Period [ ] 488.67		
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) ▼		Memo Item <input type="checkbox"/>		
State: District:			Amount of Each Disbursement this Period [ ] 488.67		
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[ ] 2189.21		
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5028</b> Amount of Each Disbursement this Period [REDACTED] 963.10	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement for event admission fees/tickets		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5033</b> Amount of Each Disbursement this Period [REDACTED] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Consulting		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5034</b> Amount of Each Disbursement this Period [REDACTED] 666.41	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement for event admission/ticket costs		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3129.51
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]





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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5050</b> Amount of Each Disbursement this Period [ ] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Consulting		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5051</b> Amount of Each Disbursement this Period [ ] 764.01	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Event tickets/admission reimbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5052</b> Amount of Each Disbursement this Period [ ] 956.16	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Event tickets/admission reimbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3220.17
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement  
Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.4894**  
Amount of Each Disbursement this Period  
35.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement  
Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.4900**  
Amount of Each Disbursement this Period  
23.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement  
Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.4946**  
Amount of Each Disbursement this Period  
87.41

Memo Item

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

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

147.36

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.4949  
Amount of Each Disbursement this Period  
35.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 23 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.4960  
Amount of Each Disbursement this Period  
28.27

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.4963  
Amount of Each Disbursement this Period  
41.24

Memo Item

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

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

105.47

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)  
**A. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4976

Amount of Each Disbursement this Period: 42.85

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 09 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4980

Amount of Each Disbursement this Period: 37.03

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 14 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4987

Amount of Each Disbursement this Period: 18.71

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 98.59

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 19 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.4994**  
Amount of Each Disbursement this Period  
25.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5003**  
Amount of Each Disbursement this Period  
26.67

Memo Item

Full Name (Last, First, Middle Initial)

**C. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.4956**  
Amount of Each Disbursement this Period  
28.54

Memo Item

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

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

80.81

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.4961  
Amount of Each Disbursement this Period  
24.19

Memo Item

Full Name (Last, First, Middle Initial)

**B. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.4964  
Amount of Each Disbursement this Period  
43.11

Memo Item

Full Name (Last, First, Middle Initial)

**C. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.4972  
Amount of Each Disbursement this Period  
23.19

Memo Item

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

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

90.49

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4945</b> Amount of Each Disbursement this Period [ ] 45.25	
City San Francisco	State CA	Zip Code 94105	Category/ Type [ ]
Purpose of Disbursement Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4974</b> Amount of Each Disbursement this Period [ ] 16.79	
City San Francisco	State CA	Zip Code 94105	Category/ Type [ ]
Purpose of Disbursement Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4982</b> Amount of Each Disbursement this Period [ ] 5.95	
City San Francisco	State CA	Zip Code 94105	Category/ Type [ ]
Purpose of Disbursement Stakeholder Meeting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 67.99
<b>TOTAL</b> 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)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4983

Amount of Each Disbursement this Period: 9.04

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4984

Amount of Each Disbursement this Period: 16.85

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.4985

Amount of Each Disbursement this Period: 17.15

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 43.04

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 26 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5002**

Amount of Each Disbursement this Period: 25.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. Via Vite**

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 05 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4975**

Amount of Each Disbursement this Period: 51.69

Memo Item

Full Name (Last, First, Middle Initial)

**C. Washington Platform**

Mailing Address 1000 Elm St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 27 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.4906**

Amount of Each Disbursement this Period: 42.85

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 120.50

**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)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Washington Platform</b>			Date of Disbursement MM / DD / YYYY 04 / 10 / 2017	
Mailing Address 1000 Elm St				
City Cincinnati	State OH	Zip Code 45202	FEC Identification Number C [ ] <b>Transaction ID : SB21B.4915</b> Amount of Each Disbursement this Period [ ] 57.62	
Purpose of Disbursement Stakeholder Meeting		Candidate Name	Category/Type [ ]	
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>B. Washington Platform</b>			Date of Disbursement MM / DD / YYYY 06 / 08 / 2017	
Mailing Address 1000 Elm St				
City Cincinnati	State OH	Zip Code 45202	FEC Identification Number C [ ] <b>Transaction ID : SB21B.4979</b> Amount of Each Disbursement this Period [ ] 29.08	
Purpose of Disbursement Stakeholder Meeting		Candidate Name	Category/Type [ ]	
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>C. Washington Platform</b>			Date of Disbursement MM / DD / YYYY 06 / 09 / 2017	
Mailing Address 1000 Elm St				
City Cincinnati	State OH	Zip Code 45202	FEC Identification Number C [ ] <b>Transaction ID : SB21B.4981</b> Amount of Each Disbursement this Period [ ] 61.90	
Purpose of Disbursement Stakeholder Meeting		Candidate Name	Category/Type [ ]	
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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 148.60
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 36051.05

**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 checked="" 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)  
**Cincinnatus PAC**

**A. CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1631

City BALTIMORE State MD Zip Code 21203

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2017  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2017

FEC Identification Number: C C00310318

Transaction ID : SB23.5022

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input 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)  
**Cincinnatus PAC**

**A. OAPSE/AFSCME Turnaround PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 6805 Oak Creek Dr #1

City Columbus State OH Zip Code 43229

Purpose of Disbursement Returned contribution form Ohio PAC

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 05 / 08 / 2017

FEC Identification Number C

Transaction ID : SB28A.5040

Amount of Each Disbursement this Period 1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

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

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

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

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnati PAC**

Full Name (Last, First, Middle Initial)

**A. Crimestoppers**

Mailing Address 2000 Radcliff Dr

City Cincinnati State OH Zip Code 45204

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2017

FEC Identification Number

C  
Transaction ID : **SB29.5012**  
Amount of Each Disbursement this Period  
750.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Garry for Council**

Mailing Address 178 Woolper Ave

City Cincinnati State OH Zip Code 45220

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2017

FEC Identification Number

C  
Transaction ID : **SB29.5055**  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hamilton County Democratic Party**

Mailing Address 6109 Webbland Place

City Cincinnati State OH Zip Code 45213

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2017

FEC Identification Number

C  
Transaction ID : **SB29.5031**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

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

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

2250.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Landsman for Cincinnati**

Full Name (Last, First, Middle Initial)  
Mailing Address 5187 Adena Trail

City Cincinnati State OH Zip Code 45230

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 25 / 2017

FEC Identification Number: C  
Transaction ID : SB29.5044  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Lighthouse Youth Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 401 E McMillan St

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 01 / 2017

FEC Identification Number: C  
Transaction ID : SB29.5036  
Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Mann for Council**

Full Name (Last, First, Middle Initial)  
Mailing Address 568 Evanswood Place

City Cincinnati State OH Zip Code 45220

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 23 / 2017

FEC Identification Number: C  
Transaction ID : SB29.5014  
Amount of Each Disbursement this Period: 1200.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Pete for DNC</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2017
Mailing Address 217 N Main St		FEC Identification Number C [ ] <b>Transaction ID : SB29.5005</b> Amount of Each Disbursement this Period [ ] 500.00
City South Bend	State IN	Zip Code 46601
Purpose of Disbursement Contribution		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. PHH 4 Toledo</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017
Mailing Address PO Box 9058		FEC Identification Number C [ ] <b>Transaction ID : SB29.5009</b> Amount of Each Disbursement this Period [ ] 1000.00
City Toledo	State OH	Zip Code 43697
Purpose of Disbursement Contribution		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Team Moroski</b>		Date of Disbursement MM / DD / YYYY 02 / 24 / 2017
Mailing Address 400 Pike St		FEC Identification Number C [ ] <b>Transaction ID : SB29.5015</b> Amount of Each Disbursement this Period [ ] 500.00
City Cincinnati	State OH	Zip Code 45202
Purpose of Disbursement Contribution		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 6700.00