

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

CELESTE FOR CONGRESS

ADDRESS (number and street)

545 E TOWN ST

Check if different than previously reported. (ACC)

COLUMBUS

OH

43215

2. FEC IDENTIFICATION NUMBER ▼

C C00506063

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

OH

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on MM / DD / YYYY

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY 02 / 16 / 2012

through

MM / DD / YYYY 03 / 31 / 2012

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

Type or Print Name of Treasurer H Ritchey Hollenbaugh

Signature of Treasurer H Ritchey Hollenbaugh

[Electronically Filed]

Date

MM / DD / YYYY 11 / 15 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
CELESTE FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	33930.00	164040.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	33930.00	164040.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	77262.70	150607.79
(b) Total Offsets to Operating Expenditures (from Line 14).....	3449.00	3449.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	73813.70	147158.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	302.31	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

CELESTE FOR CONGRESS

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election) through <input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="25190.00"/>	<input type="text" value="128375.00"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="6390.00"/>	<input type="text" value="28065.00"/>	<input type="text" value="45.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="31580.00"/>	<input type="text" value="156440.00"/>	<input type="text" value="45.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="2350.00"/>	<input type="text" value="7600.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 55

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
33930.00	164040.00	45.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
3449.00	3449.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.55	0.45	0.19
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
37379.55	167489.45	45.19

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 55

Write or Type Committee Name

CELESTE FOR CONGRESS

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="77262.70"/>	<input type="text" value="150607.79"/>	<input type="text" value="16424.54"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 55

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

200.00	150.00	50.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

77462.70	150757.79	16474.54
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

33930.00	164040.00	45.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

73813.70	147158.79	16424.54
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	40385.46
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	37379.55
25. SUBTOTAL (add Line 23 and Line 24).....	77765.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	77462.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	302.31

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jason Adams

Mailing Address 1220 Oakland Ave

City Columbus State OH Zip Code 43212

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

Name of Employer Irth Solutions Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2012

Transaction ID : SA11AI.5402

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Sharon Austin

Mailing Address 2130 Iuka Ave

City Columbus State OH Zip Code 43201

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

Name of Employer Ohio Capital Corp Occupation Development Analyst

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : SA11AI.5357

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Brent Bishop

Mailing Address 1475 W 3rd Ave

City Columbus State OH Zip Code 43212

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

Name of Employer Irth Solutions Inc Occupation President

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2012

Transaction ID : SA11AI.5346

Amount of Each Receipt this Period
 500.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) Richard Celeste		Date of Receipt MM / DD / YYYY 02 / 21 / 2012
Mailing Address 720 Crestfield Grove		Transaction ID : SA11AI.5158
City Colorado Springs	State CO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	Election Cycle-to-Date 1000.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Hugh Clark		Date of Receipt MM / DD / YYYY 02 / 20 / 2012
Mailing Address 224 E Gay St		Transaction ID : SA11AI.5349
City Columbus	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer CJI Research	Occupation Research Consultant	Election Cycle-to-Date 220.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Pamela Conrad		Date of Receipt MM / DD / YYYY 02 / 25 / 2012
Mailing Address 2125 Nature Cove Ct		Transaction ID : SA11AI.5379
City Ann Arbor	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Thomson Reuters	Occupation Sales Executive	Election Cycle-to-Date 1000.00
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1620.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maureen Corcoran		Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2012	
Mailing Address 1202 Pondhollow Ln		Transaction ID : SA11AI.5292	
City New Albany	State OH	Zip Code 43054	Amount of Each Receipt this Period _____ 300.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Vorys Health Care Advisors	Occupation President		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

Full Name (Last, First, Middle Initial) B. Loann Crane		Date of Receipt M M / D D / Y Y Y Y 02 / 21 / 2012	
Mailing Address 1 Miranova Place Ste 515		Transaction ID : SA11AI.5168	
City Columbus	State OH	Zip Code 43215	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer CRANE PLASTICS	Occupation EXECUTIVE		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) C. Michael Curtin		Date of Receipt M M / D D / Y Y Y Y 02 / 22 / 2012	
Mailing Address 1370 Cambridge Blvd		Transaction ID : SA11AI.5197	
City Columbus	State OH	Zip Code 43212	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer None	Occupation Retired		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1050.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rhonda DeMuth

Mailing Address 5 Lyonsgate Rd

City State Zip Code
Bexley OH 43209

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

Name of Employer Occupation
TDCI Business Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 23 / 2012

Transaction ID : SA11AI.5364

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Edward Feighan

Mailing Address 845 N High St

City State Zip Code
Columbus OH 43215

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

Name of Employer Occupation
Evergreen National Indemnity Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 29 / 2012

Transaction ID : SA11AI.5400

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Earlene Fields

Mailing Address 766 Brentnell Ave

City State Zip Code
Columbus OH 43219

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 01 / 2012

Transaction ID : SA11AI.5286

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Eric Fingerhut

Mailing Address 84N Ardmore Rd

City State Zip Code
Bexley OH 43209

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

Name of Employer Occupation
Battelle Memorial Institution VP for Education & STEM Learning

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2012

Transaction ID : SA11AI.5255

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Joanne Frantz

Mailing Address 2348 Arlington Ave

City State Zip Code
Upper Arlington OH 43221

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

Name of Employer Occupation
School for Young Children Teacher

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2012

Transaction ID : SA11AI.5259

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Friends of Matt Patten

Mailing Address 9361 Sagamore Cir

City State Zip Code
Strongsville OH 44136

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2012

Transaction ID : SA11AI.5301

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John Gilligan

Mailing Address 1420 Castleston Rd N

City Columbus State OH Zip Code 43220

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

Name of Employer Ice Miller Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 29 / 2012

Transaction ID : SA11AI.5394

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Pat Hoffman

Mailing Address 1321 Broadview Avenue

City Columbus State OH Zip Code 43212

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

Name of Employer Goodwill Columbus Occupation Social Worker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 28 / 2012

Transaction ID : SA11AI.5254

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Donald Hollister

Mailing Address PO Box 740

City Yellow Springs State OH Zip Code 45387

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

Name of Employer Ohio League of Conservation Occupation Ex.Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.5221

Amount of Each Receipt this Period
 500.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jerry Hultin

Mailing Address 270 Broadway
Apt 21A

City State Zip Code
New York NY 10007

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

Name of Employer Occupation
POLYTECHNIC INSTITUTE OF NYU EDUCATOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 27 / 2012

Transaction ID : SA11AI.5235

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Glenn Karr

Mailing Address 1328 Oakview Dr

City State Zip Code
Columbus OH 43235

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

Name of Employer Occupation
Self Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 17 / 2012

Transaction ID : SA11AI.5332

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
William Keathing

Mailing Address 197 Riverview Park Dr

City State Zip Code
Columbus OH 43214

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

Name of Employer Occupation
Self Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 06 / 2012

Transaction ID : SA11AI.5322

Amount of Each Receipt this Period
250.00

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

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

750.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 14 OF 55

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)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ronald Keller

Mailing Address 3476 River Narrows Rd

City Hilliad State OH Zip Code 43026

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2012

Transaction ID : SA11AI.5274

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Robert Klaffky

Mailing Address 3124 Dale Ave

City Columbus State OH Zip Code 43209

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

Name of Employer Van Meter, Ashbrook & Assoc. Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2012

Transaction ID : SA11AI.5340

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Ronald Koltak

Mailing Address 1963 N Devon Rd

City Upper Arlington State OH Zip Code 43212

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

Name of Employer Cox, Koltak & Gibson LLP Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2012

Transaction ID : SA11AI.5412

Amount of Each Receipt this Period
 250.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 15 OF 55
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Shirley Lumpe

Mailing Address 1834 Lake Shore Dr

City Columbus State OH Zip Code 43204

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

Name of Employer None Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 22 / 2012

Transaction ID : SA11AI.5187

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Kurt Malkoff

Mailing Address 2 Easton Oval Ste 450

City Columbus State OH Zip Code 43219

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

Name of Employer Self Occupation Clinical Psychologist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 22 / 2012

Transaction ID : SA11AI.5179

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Katherine Marshall

Mailing Address 72 E Oakland Ave

City Columbus State OH Zip Code 43201

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.5371

Amount of Each Receipt this Period
 100.00

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Maynard

Mailing Address 5476 Mirage Dr

City Hilliard State OH Zip Code 43026

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

Name of Employer TAPPAN WOODS LLC Occupation PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2012

Transaction ID : SA11AI.5257

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Jack Miner

Mailing Address 2005 Samada Ave

City Worthington State OH Zip Code 43085

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

Name of Employer The Ohio State University Occupation Sr Associate Registrar

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.5373

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
M Cameron Mitchell

Mailing Address 2000 Tremont Rd

City Columbus State OH Zip Code 43212

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

Name of Employer Cameron Mitchell Restaurants Occupation Restaurant Executive

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : SA11AI.5172

Amount of Each Receipt this Period
 1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jolene Molitoris

Mailing Address 7012 Ballantrae Loop

City State Zip Code
Dublin OH 43016

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

Name of Employer Occupation
US Railcar Transportation Professional

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 29 / 2012

Transaction ID : SA11A1.5404

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Richard Murray

Mailing Address 2000 W 3rd Ave

City State Zip Code
Columbus OH 43212

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

Name of Employer Occupation
None Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 16 / 2012

Transaction ID : SA11A1.5326

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Suzanne O'Connell

Mailing Address 1264 Lincoln Rd

City State Zip Code
Columbus OH 43212

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

Name of Employer Occupation
Brian Injury Assoc of OH Non-Profit Admin

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2012

Transaction ID : SA11A1.5284

Amount of Each Receipt this Period
250.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Niles Overly

Mailing Address 2475 Stonehaven Ct N

City Columbus State OH Zip Code 43220

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

Name of Employer Metro Data Center Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2012

Transaction ID : SA11AI.5366

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Caroline Para

Mailing Address 347 W 7th Ave

City Columbus State OH Zip Code 43201

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

Name of Employer Self Occupation OHIO STATE UNIVERSITY

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11AI.5288

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
John Patton

Mailing Address 4766 Riverside Dr

City Columbus State OH Zip Code 43220

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : SA11AI.5176

Amount of Each Receipt this Period
2500.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 19 OF 55
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John Patton

Mailing Address 4766 Riverside Dr

City Columbus State OH Zip Code 43220

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : SA11AI.5178

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Robert Pettigrew

Mailing Address 342 Delegate Dr

City Columbus State OH Zip Code 43235

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

Name of Employer The Healthy Workplace, Ltd Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2012

Transaction ID : SA11AI.5334

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jamie Richardson

Mailing Address 600 N Main St

City Mount Vernon State OH Zip Code 43050

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

Name of Employer WHITE CASTLE Occupation VICE-PRESIDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.5219

Amount of Each Receipt this Period
250.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John Royer

Mailing Address 1480 Dublin Rd

City Columbus State OH Zip Code 43215

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

Name of Employer Kohr Royer Griffith Inc Occupation Real Estate

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 22 / 2012

Transaction ID : SA11AI.5191

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Charles Ruma

Mailing Address 4020 Venture Ct

City Columbus State OH Zip Code 43228

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

Name of Employer Virginia Homes LTD Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2012

Transaction ID : SA11AI.5144

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Thomas Scheid

Mailing Address 455 E North Broadway

City Columbus State OH Zip Code 43214

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

Name of Employer Self Occupation Human Services Consulting

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.5217

Amount of Each Receipt this Period
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Christiana Simpson

Mailing Address 63 Maryland St

City State Zip Code
El Segundo CA 90245

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

Name of Employer Self Occupation Marketing & Communications Consultan

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2012

Transaction ID : SA11AI.5407

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Linda Sinoway

Mailing Address 122 S Ardmore Rd

City State Zip Code
Bexley OH 43209

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

Name of Employer None Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2012

Transaction ID : SA11AI.5311

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Thomas Slemmer

Mailing Address 2440 Buckley Rd

City State Zip Code
Columbus OH 43220

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

Name of Employer National Church Residences Occupation Administration

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 20 / 2012

Transaction ID : SA11AI.5350

Amount of Each Receipt this Period
250.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dwight Smith

Mailing Address 2881 Swisher Creek Crossing

City State Zip Code
New Albany OH 43054

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

Name of Employer Occupation
Sophisticated Systems Information Technology

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 28 / 2012

Transaction ID : SA11AI.5392

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lewis Smoot Sr.

Mailing Address 3919 Sunbury Rd

City State Zip Code
Columbus OH 43219

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

Name of Employer Occupation
Smoot Construction Contractor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 28 / 2012

Transaction ID : SA11AI.5266

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Mark Swebston

Mailing Address 619 Reynolds Ave

City State Zip Code
Columbus OH 43201

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

Name of Employer Occupation
Atlas Capital Services Inc Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2012

Transaction ID : SA11AI.5375

Amount of Each Receipt this Period
250.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 23 OF 55
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James Thompson

Mailing Address 2310 Tremont Rd

City Columbus State OH Zip Code 43221

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

Name of Employer **BATTELLE** Occupation **VICE PRESIDENT**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 01 / 2012

Transaction ID : SA11AI.5290

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Penny Tipps

Mailing Address 137 E State St

City Columbus State OH Zip Code 43215

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

Name of Employer **Public Policy Strategies** Occupation **President**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11AI.5208

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Laura Weisel

Mailing Address 4000 The Old Poste Rd.

City Columbus State OH Zip Code 43221

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

Name of Employer **The TLP Group** Occupation **Educator**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 20 / 2012

Transaction ID : SA11AI.5352

Amount of Each Receipt this Period
 100.00

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 24 OF 55
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ross Wells

Mailing Address 12 Sherman Ave

City Takoma Park State MD Zip Code 20912

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

Name of Employer Stroba Architectural Occupation Carpenter

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA11A1.5214

Amount of Each Receipt this Period
 _____ 120.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

_____ 120.00

_____ 25190.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN PAC FUND

Mailing Address 1370 ONTARIO ST

City State Zip Code
CLEVELAND OH 44113

FEC ID number of contributing federal political committee. **C** C00099234

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11C.5295

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MOR-PAC

Mailing Address PO BOX 91312

City State Zip Code
COLUMBUS OH 43029

FEC ID number of contributing federal political committee. **C** C00470708

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2012

Transaction ID : SA11C.5297

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2012

Transaction ID : SA11C.5233

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WHITE CASTLE SYSTEM, INC POLITICAL ACTION COMMITTEE

Mailing Address 555 W GOODALE ST/PO BOX 1498

City State Zip Code
COLUMBUS OH 43216

FEC ID number of contributing federal political committee. **C** C00112623

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 24 2012

Transaction ID : SA11C.5210

Amount of Each Receipt this Period
 600.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

600.00

2350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

A. Stone Phones

Full Name (Last, First, Middle Initial)
Stone Phones

Mailing Address 41750 Rancho Las Palmas Dr
#E3

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2012

Transaction ID : SA14.5689

Amount of Each Receipt this Period
 1250.00

Refund

B. Winning Directions

Full Name (Last, First, Middle Initial)
Winning Directions

Mailing Address 1366 San Mateo Ave

City South San Francisco State CA Zip Code 94080

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2012

Transaction ID : SA14.5265

Amount of Each Receipt this Period
 2020.50

Refund

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

3270.50

3270.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AEP		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address PO Box 24401		Amount of Each Disbursement this Period 566.84
City Canton	State OH	
Zip Code 44701	Purpose of Disbursement Electric	Transaction ID : SB17.5575
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:		

Full Name (Last, First, Middle Initial) B. John Arnold		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address 517 Meadowgreen Circle		Amount of Each Disbursement this Period 250.00
City Gahanna	State OH	
Zip Code 43230	Purpose of Disbursement Canvassing	Transaction ID : SB17.5432
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:		

Full Name (Last, First, Middle Initial) c. John Arnold		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 517 Meadowgreen Circle		Amount of Each Disbursement this Period 250.00
City Gahanna	State OH	
Zip Code 43230	Purpose of Disbursement Canvassing	Transaction ID : SB17.5555
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:		

SUBTOTAL of Disbursements This Page (optional).....	1066.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bethel AME Church			Date of Disbursement MM / DD / YYYY 02 / 20 / 2012
Mailing Address 2021 Cleveland Ave			Amount of Each Disbursement this Period 100.00
City Columbus	State OH	Zip Code 43211	
Purpose of Disbursement Advertisement		Category/ Type	Transaction ID : SB17.5463 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Blue Utopia			Date of Disbursement MM / DD / YYYY 02 / 22 / 2012
Mailing Address PO Box 4486			Amount of Each Disbursement this Period 470.47
City Seattle	State WA	Zip Code 98194	
Purpose of Disbursement Merchant Fee		Category/ Type	Transaction ID : SB17.5422
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Blue Utopia			Date of Disbursement MM / DD / YYYY 02 / 29 / 2012
Mailing Address PO Box 4486			Amount of Each Disbursement this Period 325.01
City Seattle	State WA	Zip Code 98194	
Purpose of Disbursement Merchant Fee		Category/ Type	Transaction ID : SB17.5423
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	795.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Blue Utopia		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address PO Box 4486		Amount of Each Disbursement this Period 288.26
City Seattle	State WA	
Zip Code 98194	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.5425
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:		

Full Name (Last, First, Middle Initial) B. Blue Utopia		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012
Mailing Address PO Box 4486		Amount of Each Disbursement this Period 34.67
City Seattle	State WA	
Zip Code 98194	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.5426
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:		

Full Name (Last, First, Middle Initial) c. Blue Utopia		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2012
Mailing Address PO Box 4486		Amount of Each Disbursement this Period 1.46
City Seattle	State WA	
Zip Code 98194	Purpose of Disbursement Merchant Fee	Transaction ID : SB17.5427
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:		

SUBTOTAL of Disbursements This Page (optional).....	324.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capital Plaza Parking Garage		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 50 South Young Street		Amount of Each Disbursement this Period 9.00
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Parking	Category/Type	Transaction ID : SB17.5449
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]
State: District:		

Full Name (Last, First, Middle Initial) B. Capital Plaza Parking Garage		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 50 South Young Street		Amount of Each Disbursement this Period 9.00
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Parking	Category/Type	Transaction ID : SB17.5452
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]
State: District:		

Full Name (Last, First, Middle Initial) c. Capital Plaza Parking Garage		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 50 South Young Street		Amount of Each Disbursement this Period 9.00
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Parking	Category/Type	Transaction ID : SB17.5455
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]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 55		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capital Square Printing		Date of Disbursement
Mailing Address 59 East Gay Street		M M / D D / Y Y Y Y 02 / 21 / 2012
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement Printing	Candidate Name	Amount of Each Disbursement this Period 346.94
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Capital Square Printing		Date of Disbursement
Mailing Address 59 East Gay Street		M M / D D / Y Y Y Y 02 / 21 / 2012
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement Printing	Candidate Name	Amount of Each Disbursement this Period 689.61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Capital Square Printing		Date of Disbursement
Mailing Address 59 East Gay Street		M M / D D / Y Y Y Y 02 / 21 / 2012
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement Printing	Candidate Name	Amount of Each Disbursement this Period 341.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1378.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capital Square Printing		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 59 East Gay Street		Amount of Each Disbursement this Period 1988.33
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Printing	Candidate Name	Transaction ID : SB17.5501
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Catholic Diocese of Columbus		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 197 East Gay Street		Amount of Each Disbursement this Period 1500.00
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Office Rent	Candidate Name	Transaction ID : SB17.5550
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Clear Channel		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 1105 Rathmell Road		Amount of Each Disbursement this Period 850.00
City Columbus	State OH Zip Code 43207	
Purpose of Disbursement Advertisement	Candidate Name	Transaction ID : SB17.5530
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	4338.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Columbia Gas		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address PO Box 2318		Amount of Each Disbursement this Period 95.17 Transaction ID : SB17.5582
City Columbus	State OH	
Purpose of Disbursement Gas	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:		

Full Name (Last, First, Middle Initial) B. Columbia Gas		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address PO Box 2318		Amount of Each Disbursement this Period 21.48 Transaction ID : SB17.5583
City Columbus	State OH	
Purpose of Disbursement Gas	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:		

Full Name (Last, First, Middle Initial) C. Columbus Metropolitan Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 100 E Broad St Ste 2200		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.5456 [MEMO ITEM]
City Columbus	State OH	
Purpose of Disbursement Meeting Expense	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:		

SUBTOTAL of Disbursements This Page (optional).....	95.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lindsay Curtis		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 1844 Darrow Dr		Amount of Each Disbursement this Period 465.00 Transaction ID : SB17.5553
City Powell	State OH Zip Code 43065	
Purpose of Disbursement Field Outreach	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Lindsay Curtis		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2012
Mailing Address 1844 Darrow Dr		Amount of Each Disbursement this Period 216.00 Transaction ID : SB17.5574
City Powell	State OH Zip Code 43065	
Purpose of Disbursement Field Outreach	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Lindsay Curtis		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2012
Mailing Address 1844 Darrow Dr		Amount of Each Disbursement this Period 186.00 Transaction ID : SB17.5581
City Powell	State OH Zip Code 43065	
Purpose of Disbursement Field Outreach	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	867.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fulton Sign & Decal			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address 7144 Industrial Park Boulevard			Amount of Each Disbursement this Period 1295.94 Transaction ID : SB17.5434
City Mentor	State OH	Zip Code 44060	
Purpose of Disbursement Design & Printing		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:			

Full Name (Last, First, Middle Initial) B. Fulton Sign & Decal			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 7144 Industrial Park Boulevard			Amount of Each Disbursement this Period 1215.94 Transaction ID : SB17.5503
City Mentor	State OH	Zip Code 44060	
Purpose of Disbursement Design & Printing		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:			

Full Name (Last, First, Middle Initial) c. Get Go			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 2845 N High St			Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.5517 [MEMO ITEM]
City Columbus	State OH	Zip Code 43202	
Purpose of Disbursement Travel Expense		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:			

SUBTOTAL of Disbursements This Page (optional).....	2511.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Great Lakes Consulting & Advocacy		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address 830 City Park Ave		Amount of Each Disbursement this Period 2750.00 Transaction ID : SB17.5431
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Campaign Management Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Great Lakes Consulting & Advocacy		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 830 City Park Ave		Amount of Each Disbursement this Period 2750.00 Transaction ID : SB17.5557
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Campaign Management Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. InFocus Campaigns		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2012
Mailing Address PO Box 10726		Amount of Each Disbursement this Period 1960.00 Transaction ID : SB17.5498
City Ft Worth	State TX Zip Code 76114	
Purpose of Disbursement Live Voter Calls	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:		

SUBTOTAL of Disbursements This Page (optional).....	7460.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. InFocus Campaigns		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address PO Box 10726		Amount of Each Disbursement this Period 5329.24
City Ft Worth	State TX	
Zip Code 76114	Purpose of Disbursement Live Voter Calls	Transaction ID : SB17.5563
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:		

Full Name (Last, First, Middle Initial) B. Vashitta Johnson		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address 4789 Lake Forest Blvd Apt 2E		Amount of Each Disbursement this Period 700.00
City Westerville	State OH	
Zip Code 43081	Purpose of Disbursement Communications Consulting	Transaction ID : SB17.5430
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:		

Full Name (Last, First, Middle Initial) C. Vashitta Johnson		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 4789 Lake Forest Blvd Apt 2E		Amount of Each Disbursement this Period 700.00
City Westerville	State OH	
Zip Code 43081	Purpose of Disbursement Communications Consulting	Transaction ID : SB17.5500
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:		

SUBTOTAL of Disbursements This Page (optional).....	6729.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kroger		Date of Disbursement MM / DD / YYYY 02 / 20 / 2012
Mailing Address 150 W Sycamore St		Amount of Each Disbursement this Period 9,975.00 Transaction ID : SB17.5462
City Columbus	State OH	
Zip Code 43214	Purpose of Disbursement Meeting Expense	[MEMO ITEM]
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:		

Full Name (Last, First, Middle Initial) B. Kroger		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address 150 W Sycamore St		Amount of Each Disbursement this Period 61.53 Transaction ID : SB17.5475
City Columbus	State OH	
Zip Code 43214	Purpose of Disbursement Travel Expense	[MEMO ITEM]
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:		

Full Name (Last, First, Middle Initial) c. Kroger		Date of Disbursement MM / DD / YYYY 02 / 21 / 2012
Mailing Address 150 W Sycamore St		Amount of Each Disbursement this Period 36.04 Transaction ID : SB17.5480
City Columbus	State OH	
Zip Code 43214	Purpose of Disbursement Office Supplies	[MEMO ITEM]
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:		

SUBTOTAL of Disbursements This Page (optional).....	97.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kroger			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012		
Mailing Address 150 W Sycamore St			Amount of Each Disbursement this Period 20.83		
City Columbus	State OH	Zip Code 43214	Transaction ID : SB17.5516 [MEMO ITEM]		
Purpose of Disbursement Meeting Expense		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:					

Full Name (Last, First, Middle Initial) B. Kroger			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012		
Mailing Address 150 W Sycamore St			Amount of Each Disbursement this Period 80.02		
City Columbus	State OH	Zip Code 43214	Transaction ID : SB17.5543		
Purpose of Disbursement Travel Expense		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:					

Full Name (Last, First, Middle Initial) c. Kroger			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2012		
Mailing Address 150 W Sycamore St			Amount of Each Disbursement this Period 50.00		
City Columbus	State OH	Zip Code 43214	Transaction ID : SB17.5573		
Purpose of Disbursement Meeting Expense		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:					

SUBTOTAL of Disbursements This Page (optional).....	130.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lorz Communications		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 1331 S High St		Amount of Each Disbursement this Period 750.00
City Columbus	State OH Zip Code 43207	
Purpose of Disbursement Adversitment	Candidate Name	Transaction ID : SB17.5514
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:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. McTigue & McGinnis LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2012
Mailing Address 545 E Town St		Amount of Each Disbursement this Period 1286.83
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Legal Services	Candidate Name	Transaction ID : SB17.5494
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Judith Oppenheimer		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 86 Bishop Square		Amount of Each Disbursement this Period 2000.00
City Bexley	State OH Zip Code 43209	
Purpose of Disbursement Fundraising Consulting	Candidate Name	Transaction ID : SB17.5447
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3286.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Judith Oppenheimer		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 86 Bishop Square		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.5529
City Bexley	State OH	
Zip Code 43209	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Connor Patton		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 830 City Park Ave		Amount of Each Disbursement this Period 368.23 Transaction ID : SB17.5448
City Columbus	State OH	
Zip Code 43215	Purpose of Disbursement Parking, Meeting Expense & Advertisement	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:	

Full Name (Last, First, Middle Initial) c. Connor Patton		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 830 City Park Ave		Amount of Each Disbursement this Period 790.83 Transaction ID : SB17.5513
City Columbus	State OH	
Zip Code 43215	Purpose of Disbursement Advertisement, Meeting & Travel 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:	

SUBTOTAL of Disbursements This Page (optional).....	2159.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Radiohio Inc		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address 34 S Third St		Amount of Each Disbursement this Period 780.00 Transaction ID : SB17.5439
City Columbus	State OH	
Zip Code 43215	Purpose of Disbursement Media Buy	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:	

Full Name (Last, First, Middle Initial) B. Radiohio Inc		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2012
Mailing Address 34 S Third St		Amount of Each Disbursement this Period 780.00 Transaction ID : SB17.5486
City Columbus	State OH	
Zip Code 43215	Purpose of Disbursement Media Buy	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:	

Full Name (Last, First, Middle Initial) c. Radiohio Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 34 S Third St		Amount of Each Disbursement this Period 4275.00 Transaction ID : SB17.5532
City Columbus	State OH	
Zip Code 43215	Purpose of Disbursement Media Buy	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:	

SUBTOTAL of Disbursements This Page (optional).....	5835.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Radiohio Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address 34 S Third St		Amount of Each Disbursement this Period 820.00
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Media Buy	Category/Type	Transaction ID : SB17.5538
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. River Club		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 679 W Spring Street		Amount of Each Disbursement this Period 64.00
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Meeting Expense	Category/Type	Transaction ID : SB17.5458
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address 1747 Olentangy River Rd		Amount of Each Disbursement this Period 46.88
City Columbus	State OH Zip Code 43212	
Purpose of Disbursement Office Supplies	Category/Type	Transaction ID : SB17.5429
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	820.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Staples		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>16</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		16		2012
M M	/	D D	/	Y Y Y Y									
02		16		2012									
Mailing Address 1747 Olentangy River Rd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Columbus</td> <td>OH</td> <td>43212</td> </tr> </table>		City	State	Zip Code	Columbus	OH	43212	<table border="1"> <tr> <td>234.80</td> </tr> </table>		234.80			
City	State	Zip Code											
Columbus	OH	43212											
234.80													
Purpose of Disbursement Office Supplies		Transaction ID : SB17.5437											
Candidate Name		Category/Type											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Staples		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>21</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		21		2012
M M	/	D D	/	Y Y Y Y									
02		21		2012									
Mailing Address 1747 Olentangy River Rd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Columbus</td> <td>OH</td> <td>43212</td> </tr> </table>		City	State	Zip Code	Columbus	OH	43212	<table border="1"> <tr> <td>17.06</td> </tr> </table>		17.06			
City	State	Zip Code											
Columbus	OH	43212											
17.06													
Purpose of Disbursement Office Supplies		Transaction ID : SB17.5482											
Candidate Name		Category/Type											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Staples		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>23</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		23		2012
M M	/	D D	/	Y Y Y Y									
02		23		2012									
Mailing Address 1747 Olentangy River Rd		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Columbus</td> <td>OH</td> <td>43212</td> </tr> </table>		City	State	Zip Code	Columbus	OH	43212	<table border="1"> <tr> <td>30.94</td> </tr> </table>		30.94			
City	State	Zip Code											
Columbus	OH	43212											
30.94													
Purpose of Disbursement Office Supplies		Transaction ID : SB17.5489											
Candidate Name		Category/Type											
Office Sought:	Disbursement For:												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	282.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 1747 Olentangy River Rd		Amount of Each Disbursement this Period 104.59
City Columbus	State OH Zip Code 43212	
Purpose of Disbursement Telephone Service	Candidate Name	Transaction ID : SB17.5506
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 1747 Olentangy River Rd		Amount of Each Disbursement this Period 52.29
City Columbus	State OH Zip Code 43212	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : SB17.5508
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 1747 Olentangy River Rd		Amount of Each Disbursement this Period 88.04
City Columbus	State OH Zip Code 43212	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : SB17.5542
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	244.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 1747 Olentangy River Rd		Amount of Each Disbursement this Period 3250.00 Transaction ID : SB17.5544
City Columbus State OH Zip Code 43212	Purpose of Disbursement Office Supplies	
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:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2012
Mailing Address 1747 Olentangy River Rd		Amount of Each Disbursement this Period 11.73 Transaction ID : SB17.5545
City Columbus State OH Zip Code 43212	Purpose of Disbursement Office Supplies	
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:		

Full Name (Last, First, Middle Initial) C. Stone Phones		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2012
Mailing Address 41750 Rancho Las Palmas Dr #E3		Amount of Each Disbursement this Period 3285.83 Transaction ID : SB17.5495
City Rancho Mirage State CA Zip Code 92270	Purpose of Disbursement Robo Calls	
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:		

SUBTOTAL of Disbursements This Page (optional).....	3285.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 55	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stone Phones		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 41750 Rancho Las Palmas Dr #E3		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.5534
City Rancho Mirage State CA Zip Code 92270	Purpose of Disbursement Robo Calls 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:		

Full Name (Last, First, Middle Initial) B. Stone Phones		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address 41750 Rancho Las Palmas Dr #E3		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.5546
City Rancho Mirage State CA Zip Code 92270	Purpose of Disbursement Robo Calls 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:		

Full Name (Last, First, Middle Initial) C. Stone Phones		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address 41750 Rancho Las Palmas Dr #E3		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.5547
City Rancho Mirage State CA Zip Code 92270	Purpose of Disbursement Robo Calls 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:		

SUBTOTAL of Disbursements This Page (optional).....	4700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stone Phones		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2012
Mailing Address 41750 Rancho Las Palmas Dr #E3		Amount of Each Disbursement this Period 1000.00
City Rancho Mirage	State CA Zip Code 92270	
Purpose of Disbursement Robo Calls	Category/Type	Transaction ID : SB17.5566
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. Ronald C Sylvester		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address 998 Montrose Ave		Amount of Each Disbursement this Period 500.00
City Bexley	State OH Zip Code 43209	
Purpose of Disbursement Communications Services	Category/Type	Transaction ID : SB17.5568
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Time Warner Cable Media		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 1015 Olentangy River Rd		Amount of Each Disbursement this Period 4484.60
City Columbus	State OH Zip Code 43212	
Purpose of Disbursement Media Buy	Category/Type	Transaction ID : SB17.5466
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5984.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Time Warner Cable Media		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address 1015 Olentangy River Rd		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.5533
City Columbus	State OH Zip Code 43212	
Purpose of Disbursement Media Buy	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:		

Full Name (Last, First, Middle Initial) B. US Post Office		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address 850 Twin Rivers Dr		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.5436
City Columbus	State OH Zip Code 43216	
Purpose of Disbursement Postage	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:		

Full Name (Last, First, Middle Initial) c. US Post Office		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012
Mailing Address 850 Twin Rivers Dr		Amount of Each Disbursement this Period 360.00 Transaction ID : SB17.5471
City Columbus	State OH Zip Code 43216	
Purpose of Disbursement Postage	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:		

SUBTOTAL of Disbursements This Page (optional).....	4760.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Post Office		Date of Disbursement
Mailing Address 850 Twin Rivers Dr		M M / D D / Y Y Y Y 02 / 21 / 2012
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement Postage	Amount of Each Disbursement this Period 90.00	
Candidate Name	Transaction ID : SB17.5474	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. US Post Office		Date of Disbursement
Mailing Address 850 Twin Rivers Dr		M M / D D / Y Y Y Y 02 / 23 / 2012
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement Postage	Amount of Each Disbursement this Period 180.00	
Candidate Name	Transaction ID : SB17.5487	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) c. US Post Office		Date of Disbursement
Mailing Address 850 Twin Rivers Dr		M M / D D / Y Y Y Y 02 / 23 / 2012
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement Postage	Amount of Each Disbursement this Period 40.50	
Candidate Name	Transaction ID : SB17.5488	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	310.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Post Office		Date of Disbursement MM / DD / YYYY 02 / 24 / 2012
Mailing Address 850 Twin Rivers Dr		Amount of Each Disbursement this Period 225.00 Transaction ID : SB17.5497
City Columbus	State OH	
Zip Code 43216	Purpose of Disbursement Postage	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:	

Full Name (Last, First, Middle Initial) B. US Post Office		Date of Disbursement MM / DD / YYYY 02 / 27 / 2012
Mailing Address 850 Twin Rivers Dr		Amount of Each Disbursement this Period 1350.00 Transaction ID : SB17.5502
City Columbus	State OH	
Zip Code 43216	Purpose of Disbursement Postage	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:	

Full Name (Last, First, Middle Initial) c. US Post Office		Date of Disbursement MM / DD / YYYY 02 / 28 / 2012
Mailing Address 850 Twin Rivers Dr		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.5519
City Columbus	State OH	
Zip Code 43216	Purpose of Disbursement Postage	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:	

SUBTOTAL of Disbursements This Page (optional).....	2475.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 55			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Post Office		Date of Disbursement
Mailing Address 850 Twin Rivers Dr		M M / D D / Y Y Y Y 03 / 01 / 2012
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 900.00
Candidate Name	Category/ Type	Transaction ID : SB17.5535
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. US Post Office		Date of Disbursement
Mailing Address 850 Twin Rivers Dr		M M / D D / Y Y Y Y 03 / 05 / 2012
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 315.00
Candidate Name	Category/ Type	Transaction ID : SB17.5541
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Winning Directions		Date of Disbursement
Mailing Address 1366 San Mateo Ave		M M / D D / Y Y Y Y 02 / 22 / 2012
City South San Francisco	State CA	Zip Code 94080
Purpose of Disbursement Media Buy		Amount of Each Disbursement this Period 11887.50
Candidate Name	Category/ Type	Transaction ID : SB17.5485
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13102.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Winning Directions		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 1366 San Mateo Ave		Amount of Each Disbursement this Period 2377.44 Transaction ID : SB17.5552
City South San Francisco	State CA Zip Code 94080	
Purpose of Disbursement Printing & Postage	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:		

Full Name (Last, First, Middle Initial) B. Wireless Resources LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 262 S 3rd St		Amount of Each Disbursement this Period 125.00 Transaction ID : SB17.5505
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Telephone Service	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:		

Full Name (Last, First, Middle Initial) c. Wireless Resources LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2012
Mailing Address 262 S 3rd St		Amount of Each Disbursement this Period 45.00 Transaction ID : SB17.5509
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Telephone Service	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:		

SUBTOTAL of Disbursements This Page (optional).....	2547.44
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 55	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
CELESTE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Zetter Hardware		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2012
Mailing Address 101 E Main St		Amount of Each Disbursement this Period 8.50
City Columbus	State OH Zip Code 43215	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : SB17.5465
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	75588.55