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2010 AUG -9 AM 8: 13

FEC FORM 1	STATEME ORGANIZ	_ _		Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Iott for Congres	ss 2010			
		1 1 1 1 1 1 1 1 1	<u> </u>	
ADDRESS (number and street)	5245 Keer)e:	···.	
(Check if address is changed)	Manclova		OH I	435421-
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one o	e-mail address) US • ^ ^ • COM		
(Check if address		<u> </u>	<u> </u>	
6.4 is changed)		<u> </u>		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			•
(Check if address		14111111		
is changed)				
2. DATE 0 7 2	2 2 0 1 0			
3. FEC IDENTIFICATION N	имвек С	00473835		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined to	his Statement and to the bes	tot my knowledge and belief i	it is trüe, correct	and complete.
Type or Print Name of Treasure	William L	turlis		
Signature of Treasurer	lm	Inki'	Date 0	22 2010
NOTE: Submission of false, erron	·	may subject the person signing ION SHOULD BE REPORTED V		the penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

		COMMITTEE
Can	didate	e Committee:
(a)	X	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	Ü	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name Cand		Richard B. Iott
	idate Affiliati	on REP Office State OH Sought: Xi House Senate President District 09
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Cand		
Part	y Con	nmittee:
(d)		This committee is a (National, State (Democratic, Republican, etc.) Party.
Polit	ical A	ction Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Join	t Fund	Iraising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1,	FEC ID number C
	2.	FEC ID number
	3.	
	4	

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Name		rage o
Iott for Congress		
		or I andorobin BAC Spanner
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundralsing Representative, o	or Leadership PAC Sponsor
	1!1111111111111	
Mailing Address		
•		1
	CITY STATE	ZIP CODE
Relationship:	d Organization Affiliated Committee July Joint Fundraising Representati	ive Leadership PAC Sponsor
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and position of the per	rson in possession of committee
	William L. Curlis	,
Full Name	, 865 Macon Alley	<u> </u>
Mailing Address		
	Columbus , OH	
	Columbus	43200
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	1, 4 - 444 - 2042
8. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; a assistant treasurer).	and the name and address of
Full Name	William L. Curlis	1
of Treasurer	865 Macon Alley	
Mailing Address		columbus.rr.com
	Columbus OH	143206
	CITY STATE	ZIP CODE
Title or Position	Telephone number 61	4 - [444] - [2042]

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	levised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY ST/	ATE ZIP CODE
Title or Position		
	Telephone number	
Name of Bank, Deposit	tory, etc.	
Mailing Address	Fifth Third Bank 26521 North Dixie Highway Perrysburg	
LJ,	26521 North Dixie Highway	OH 43551
Ll,	26521 North Dixie Highway Perrysburg	
LJ,	26521 North Dixie Highway Perrysburg CITY ST	OH 43551
Mailing Address	26521 North Dixie Highway Perrysburg CITY ST	OH 43551
Mailing Address	26521 North Dixie Highway Perrysburg CITY ST	OH 43551 ATE ZIP CODE
Mailing Address Name of Bank, Deposi	26521 North Dixie Highway Perrysburg CITY ST.	OH 43551 ATE ZIP CODE
Mailing Address Name of Bank, Deposi	26521 North Dixie Highway Perrysburg CITY ST.	OH 43551 ATE ZIP CODE

(3/2005)

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