

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
Blue Ohio PAC

ADDRESS (number and street) P.O. Box 21499  
Check if different than previously reported. (ACC) Columbus OH 43221-0499

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00570424 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 07 / 01 / 2015 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2015

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 Matthew Hersha

Signature of Treasurer Matthew Hersha [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 27 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Blue Ohio PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="11965.30"/>	<input type="text" value="11965.30"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6094.17"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1020.00"/>	<input type="text" value="24240.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7114.17"/>	<input type="text" value="36205.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6166.22"/>	<input type="text" value="35257.35"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="947.95"/>	<input type="text" value="947.95"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
**Blue Ohio PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1020.00	21990.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1020.00	21990.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1020.00	24240.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1020.00	24240.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1020.00	24240.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6166.22	20007.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6166.22	20007.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	12750.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6166.22	35257.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6166.22	35257.35

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1020.00	24240.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1020.00	24240.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6166.22	20007.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6166.22	20007.35

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

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

FOR LINE NUMBER: PAGE 6 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert R. Doersam**

Mailing Address 82 E Norwich Ave

City State Zip Code  
Columbus OH 43201-1217

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

Name of Employer Occupation  
Ohio House Democratic Caucus Finance Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2015  
**Transaction ID : VNW74DYDB31**

Amount of Each Receipt this Period  
10.00

Full Name (Last, First, Middle Initial)  
**B. William J. Wheeler**

Mailing Address 106 N High St  
Apt 301

City State Zip Code  
Columbus OH 43215-3038

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

Name of Employer Occupation  
Not Employed Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
610.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2015  
**Transaction ID : VNW74DYGBC4**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. Patricia C. Sheridan**

Mailing Address 230 Riverside Dr  
Apt 1A

City State Zip Code  
New York NY 10025-6131

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

Name of Employer Occupation  
Self-Employed Voice Teacher

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2015  
**Transaction ID : VNW74DZ6XF0**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 510.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

**A. Ryan Koch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5843 Garden Hill Ln  
 City State Zip Code  
 Dublin OH 43017-2560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Secunia Senior Solutions Specialist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 13 / 2015  
**Transaction ID : VNW74DZP606**  
 Amount of Each Receipt this Period  
 25.00  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 441146  
 City State Zip Code  
 West Somerville MA 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer Occupation  
 Conduit total listed in Agg. field  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2015  
**Transaction ID : VNW74DZP606E**  
 Amount of Each Receipt this Period  
 25.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C. Mindy Hall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 341 Seminole Ave  
 City State Zip Code  
 Westerville OH 43081-2648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Bexley City Schools Teacher  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 24 / 2015  
**Transaction ID : VNW74E37PR3**  
 Amount of Each Receipt this Period  
 15.00  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

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

Mailing Address PO Box 441146

City State Zip Code  
West Somerville MA 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2015

**Transaction ID : VNW74E37PR3E**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Zach Manifold**

Mailing Address 4412 Fileway Dr

City State Zip Code  
Grove City OH 43123-8462

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

Name of Employer Occupation  
Franklin County Board of Elections Manager, Absentee Voting

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : VNW74E37PT8**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City State Zip Code  
West Somerville MA 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2015

**Transaction ID : VNW74E37PT8E**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

**A. Ryan Koch**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5843 Garden Hill Ln  
City Dublin State OH Zip Code 43017-2560  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Secunia Occupation Senior Solutions Specialist  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **225.00**

Date of Receipt **08 / 13 / 2015**  
**Transaction ID : VNW74E37Q06**  
Amount of Each Receipt this Period **25.00**  
\* Earmarked Contribution: See Below

**B. ActBlue**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 441146  
City West Somerville State MA Zip Code 02144-0031  
FEC ID number of contributing federal political committee. **C C00401224**  
Name of Employer Occupation Conduit total listed in Agg. field  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **360.00**

Date of Receipt **08 / 16 / 2015**  
**Transaction ID : VNW74E37Q06E**  
Amount of Each Receipt this Period **25.00**  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C. Brittany A. Boulton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 526 E Sycamore St Ste 1200  
City Columbus State OH Zip Code 43206-1395  
FEC ID number of contributing federal political committee. **C**  
Name of Employer G2G Consulting, LLC Occupation Government Affairs Coordinator  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **100.00**

Date of Receipt **08 / 25 / 2015**  
**Transaction ID : VNW74E01TW7**  
Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **125.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)  
**A. Mindy Hall**

Mailing Address 341 Seminole Ave

City State Zip Code  
Westerville OH 43081-2648

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

Name of Employer Occupation  
Bexley City Schools Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 24 / 2015  
**Transaction ID : VNW74E37Q97**

Amount of Each Receipt this Period  
15.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City State Zip Code  
West Somerville MA 02144-0031

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 30 / 2015  
**Transaction ID : VNW74E37Q97E**

Amount of Each Receipt this Period  
15.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**c. Zach Manifold**

Mailing Address 4412 Fileway Dr

City State Zip Code  
Grove City OH 43123-8462

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

Name of Employer Occupation  
Franklin County Board of Elections Manager, Absentee Voting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 30 / 2015  
**Transaction ID : VNW74E37Q71**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 33
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

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

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
**08 / 30 / 2015**

**Transaction ID : VNW74E37Q71E**

Amount of Each Receipt this Period  
**25.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Ryan Koch**

Mailing Address **5843 Garden Hill Ln**

City **Dublin** State **OH** Zip Code **43017-2560**

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

Name of Employer **Secunia** Occupation **Senior Solutions Specialist**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
**09 / 13 / 2015**

**Transaction ID : VNW74E37WD8**

Amount of Each Receipt this Period  
**25.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
**09 / 13 / 2015**

**Transaction ID : VNW74E37WD8E**

Amount of Each Receipt this Period  
**25.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>25.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

**A. Mindy Hall**  
Full Name (Last, First, Middle Initial)

Mailing Address 341 Seminole Ave

City Westerville State OH Zip Code 43081-2648

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

Name of Employer Bexley City Schools Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt 09 / 24 / 2015  
**Transaction ID : VNW74E37WQ7**

Amount of Each Receipt this Period 15.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 27 / 2015  
**Transaction ID : VNW74E37WQ7E**

Amount of Each Receipt this Period 15.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**c. Zach Manifold**  
Full Name (Last, First, Middle Initial)

Mailing Address 4412 Fileway Dr

City Grove City State OH Zip Code 43123-8462

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

Name of Employer Franklin County Board of Elections Occupation Manager, Absentee Voting

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : VNW74E37XE9**

Amount of Each Receipt this Period 25.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

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

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
**09 / 30 / 2015**

**Transaction ID : VNW74E37XE9E**

Amount of Each Receipt this Period  
**25.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Ryan Koch**

Mailing Address **5843 Garden Hill Ln**

City **Dublin** State **OH** Zip Code **43017-2560**

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

Name of Employer **Secunia** Occupation **Senior Solutions Specialist**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
**10 / 13 / 2015**

**Transaction ID : VNW74E384T7**

Amount of Each Receipt this Period  
**25.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
**10 / 18 / 2015**

**Transaction ID : VNW74E384T7E**

Amount of Each Receipt this Period  
**25.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **25.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

**A. Mindy Hall**  
Full Name (Last, First, Middle Initial)

Mailing Address 341 Seminole Ave

City Westerville State OH Zip Code 43081-2648

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

Name of Employer Bexley City Schools Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt 10 / 24 / 2015  
**Transaction ID : VNW74E384X0**

Amount of Each Receipt this Period 15.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 25 / 2015  
**Transaction ID : VNW74E384X0E**

Amount of Each Receipt this Period 15.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C. Zach Manifold**  
Full Name (Last, First, Middle Initial)

Mailing Address 4412 Fileway Dr

City Grove City State OH Zip Code 43123-8462

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

Name of Employer Franklin County Board of Elections Occupation Manager, Absentee Voting

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 30 / 2015  
**Transaction ID : VNW74E384Z6**

Amount of Each Receipt this Period 25.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

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

Mailing Address PO Box 441146

City State Zip Code  
West Somerville MA 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2015  
**Transaction ID : VNW74E384Z6E**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Christina H. Dorr**

Mailing Address 6200 Wrothston Dr

City State Zip Code  
Columbus OH 43228-9247

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

Name of Employer Occupation  
Hilliard City School District Teacher

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 09 / 2015  
**Transaction ID : VNW74E5RM64**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Ryan Koch**

Mailing Address 5843 Garden Hill Ln

City State Zip Code  
Dublin OH 43017-2560

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

Name of Employer Occupation  
Secunia Senior Solutions Specialist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 13 / 2015  
**Transaction ID : VNW74E38TZ4**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 33
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

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

Mailing Address **PO Box 441146**

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2015

**Transaction ID : VNW74E38TZ4E**

Amount of Each Receipt this Period  

25.00
-------

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Zach Manifold**

Mailing Address **4412 Fileway Dr**

City Grove City	State OH	Zip Code 43123-8462
--------------------	-------------	------------------------

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

Name of Employer Franklin County Board of Elections	Occupation Manager, Absentee Voting
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

**Transaction ID : VNW74E38V19**

Amount of Each Receipt this Period  

25.00
-------

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 441146**

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

**Transaction ID : VNW74E38V19E**

Amount of Each Receipt this Period  

25.00
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**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 17 OF 33  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)  
**A. Ryan Koch**

Mailing Address 5843 Garden Hill Ln

City State Zip Code  
Dublin OH 43017-2560

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

Name of Employer Occupation  
Secunia Senior Solutions Specialist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2015

**Transaction ID : VNW74E5QPW5**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

City State Zip Code  
West Somerville MA 02144-0031

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 13 / 2015

**Transaction ID : VNW74E5QPW5E**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**c. Zach Manifold**

Mailing Address 4412 Fileway Dr

City State Zip Code  
Grove City OH 43123-8462

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

Name of Employer Occupation  
Franklin County Board of Elections Manager, Absentee Voting

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : VNW74E5QPX3**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 33  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

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

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : VNW74E5QPX3E**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1020.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Compliance Associates, Inc.**

Mailing Address 918 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-2140

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2015

Transaction ID : VNV7W9RRQB1

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Sage Payment Solutions**

Mailing Address 12120 Sunset Hills Rd Ste 500

City Reston State VA Zip Code 20190-5858

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2015

Transaction ID : VNV7W9RRZJ3

Amount of Each Disbursement this Period

54.54

Full Name (Last, First, Middle Initial)

**C. Google Inc.**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2015

Transaction ID : VNV7W9RS5F4

Amount of Each Disbursement this Period

5.00

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

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

559.54

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. McTigue McGinnis & Colombo LLC**

Mailing Address 545 E Town St

City Columbus State OH Zip Code 43215-4801

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2015

Transaction ID : VNV7W9RVER5

Amount of Each Disbursement this Period

1500.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 19 / 2015

Transaction ID : VNV7W9RY6A2

Amount of Each Disbursement this Period

0.99

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Capitol Compliance Associates, Inc.**

Mailing Address 918 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-2140

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 21 / 2015

Transaction ID : VNV7W9RW766

Amount of Each Disbursement this Period

2500.00

Category/  
Type

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

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

4000.99

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 26 / 2015

**Transaction ID : VNV7W9SAT78**

Amount of Each Disbursement this Period

0.60

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2015

**Transaction ID : VNV7W9SATB9**

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

**C. Google Inc.**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2015

**Transaction ID : VNV7W9RXSG2**

Amount of Each Disbursement this Period

5.00

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

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

6.59

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. Sage Payment Solutions**

Mailing Address 12120 Sunset Hills Rd  
Ste 500

City Reston State VA Zip Code 20190-5858

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2015

**Transaction ID : VNV7W9SDSG7**

Amount of Each Disbursement this Period

34.03

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 01

City Los Angeles State CA Zip Code 90096-8000

Purpose of Disbursement  
Credit Card Payment (See Below)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2015

**Transaction ID : VNV7W9RXHB6**

Amount of Each Disbursement this Period

270.80

Full Name (Last, First, Middle Initial)

**C. GoDaddy.com**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Registration

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2015

**Transaction ID : VNV7W9RXHC4**

Amount of Each Disbursement this Period

105.99

[MEMO ITEM]

\*

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

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

304.83

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. GoDaddy.com**

Date of Disbursement: MM / DD / YYYY  
08 / 06 / 2015

Mailing Address: 14455 N Hayden Rd  
Ste 219

City: Scottsdale State: AZ Zip Code: 85260-6993

Purpose of Disbursement: Domain Registration

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID : VNV7W9RXHE0

Amount of Each Disbursement this Period: 121.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. GoDaddy.com**

Date of Disbursement: MM / DD / YYYY  
08 / 06 / 2015

Mailing Address: 14455 N Hayden Rd  
Ste 219

City: Scottsdale State: AZ Zip Code: 85260-6993

Purpose of Disbursement: Domain Registration

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID : VNV7W9RXHF8

Amount of Each Disbursement this Period: 36.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. USPS.com**

Date of Disbursement: MM / DD / YYYY  
08 / 06 / 2015

Mailing Address: 475 Lenfant Plz SW

City: Washington State: DC Zip Code: 20260-0004

Purpose of Disbursement: Postage

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Transaction ID : VNV7W9RXHD2

Amount of Each Disbursement this Period: 7.50

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 16 / 2015

Transaction ID : VNV7W9SATD5

Amount of Each Disbursement this Period: 0.99

**B. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 30 / 2015

Transaction ID : VNV7W9SATP6

Amount of Each Disbursement this Period: 1.59

**C. Google Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
09 / 02 / 2015

Transaction ID : VNV7W9SBKS3

Amount of Each Disbursement this Period: 5.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7.58

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. Sage Payment Solutions**

Mailing Address 12120 Sunset Hills Rd  
Ste 500

City Reston State VA Zip Code 20190-5858

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2015

Transaction ID : VNV7W9SDSH5

Amount of Each Disbursement this Period

5.64

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2015

Transaction ID : VNV7W9SAW62

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

**C. Huntington National Bank**

Mailing Address 3650 Fishinger Blvd

City Hilliard State OH Zip Code 43026-9271

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

Transaction ID : VNV7W9SBKY2

Amount of Each Disbursement this Period

20.00

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

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

26.63

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2015

Transaction ID : VNV7W9SAW70

Amount of Each Disbursement this Period

0.60

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 01

City Los Angeles State CA Zip Code 90096-8000

Purpose of Disbursement  
Credit Card Payment (See Below)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2015

Transaction ID : VNV7W9SBKCO

Amount of Each Disbursement this Period

1004.00

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 01

City Los Angeles State CA Zip Code 90096-8000

Purpose of Disbursement  
Service Charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2015

Transaction ID : VNV7W9SBKF4

Amount of Each Disbursement this Period

35.00

[MEMO ITEM]

\*

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

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

1004.60

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNV7W9SBKD8**

Amount of Each Disbursement this Period

[MEMO ITEM]

\*

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNV7W9SAW96**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Google Inc.**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : VNV7W9SBKT1**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. Huntington National Bank**

Mailing Address 3650 Fishinger Blvd

City Hilliard State OH Zip Code 43026-9271

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : VNV7W9SBKZ0

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 18 / 2015

Transaction ID : VNV7W9SAWC0

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 25 / 2015

Transaction ID : VNV7W9SAWD8

Amount of Each Disbursement this Period

0.60

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

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

21.59

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 31 / 2015

**Transaction ID : VNV7W9SAWG1**

Amount of Each Disbursement this Period: 0.99

Category/Type

Full Name (Last, First, Middle Initial)

**B. Google Inc.**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 01 / 2015

**Transaction ID : VNV7W9SBKW7**

Amount of Each Disbursement this Period: 5.00

Category/Type

Full Name (Last, First, Middle Initial)

**C. NGP VAN, Inc.**

Mailing Address 1101 15th St NW Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 02 / 2015

**Transaction ID : VNV7W9SBM16**

Amount of Each Disbursement this Period: 69.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 74.99

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. USPS.com**

Mailing Address 475 Lenfant Plz SW

City Washington State DC Zip Code 20260-0004

Purpose of Disbursement  
Post Office Box Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2015

**Transaction ID : VNV7W9SDSF9**

Amount of Each Disbursement this Period

41.00

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2015

**Transaction ID : VNV7W9SB767**

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

**C. Huntington National Bank**

Mailing Address 3650 Fishinger Blvd

City Hilliard State OH Zip Code 43026-9271

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2015

**Transaction ID : VNV7W9SBM08**

Amount of Each Disbursement this Period

20.00

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

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

61.99

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 30 / 2015

Transaction ID : VNV7W9SB775

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

**B. Google Inc.**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2015

Transaction ID : VNV7W9SBKX4

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 13 / 2015

Transaction ID : VNV7W9SJSK1

Amount of Each Disbursement this Period

0.99

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

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

6.98

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. Intuit Inc.**

Mailing Address 2700 Coast Ave

City Mountain View State CA Zip Code 94043-1140

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 24 / 2015

**Transaction ID : VNV7W9SDSA9**

Amount of Each Disbursement this Period

42.95

Full Name (Last, First, Middle Initial)

**B. Matthew Hersha**

Mailing Address 3179 Dunlavin Glen Rd

City Columbus State OH Zip Code 43221-4419

Purpose of Disbursement  
Reimbursement (See Below)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2015

**Transaction ID : VNV7W9SDSB7**

Amount of Each Disbursement this Period

39.98

Full Name (Last, First, Middle Initial)

**C. GoDaddy.com**

Mailing Address 14455 N Hayden Rd  
Ste 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement  
Domain Registration

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2015

**Transaction ID : VNV7W9SDSC5**

Amount of Each Disbursement this Period

39.98

[MEMO ITEM]  
\*

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

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

82.93



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Blue Ohio PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

Transaction ID : VNV7W9SJSR1

Amount of Each Disbursement this Period

0.99

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

0.99

6166.22