

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

Citizens for Michael Wager

ADDRESS (number and street) ▼

P.O. Box 39035

Check if different than previously reported. (ACC)

Solon

OH

44139

2. **FEC IDENTIFICATION NUMBER** ▼

C C00538637

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

OH

14

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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Peggy Gries Wager

Signature of Treasurer Peggy Gries Wager

[Electronically Filed]

Date

/ /

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

Citizens for Michael Wager

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

	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))....	99601.37	131415.41
(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)).....	99601.37	131415.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	39283.80	93697.79
(b) Total Offsets to Operating Expenditures (from Line 14).....	393.00	671.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38890.80	93026.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	82873.75	
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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Citizens for Michael Wager

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	81153.12	97853.12
(ii) Unitemized	10798.25	15148.85
(iii) TOTAL of contributions from individuals	91951.37	113001.97
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7650.00	18150.00
(d) The Candidate	0.00	263.44
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	99601.37	131415.41
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	393.00	671.25
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	99994.37	132086.66

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39283.80	93697.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	40000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	40000.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	500.00	3250.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	39783.80	136947.79

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	22663.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	99994.37
25. SUBTOTAL (add Line 23 and Line 24).....	122657.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39783.80
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	82873.75

**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 5 OF 115

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)
Citizens for Michael Wager

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

Mailing Address 3134 Chatham Ct

City State Zip Code
 Westlake OH 44145-6709

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

Name of Employer Occupation
 Baker & Hostetler, LLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2016

Transaction ID : VNVTSEE8RJ8

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 35 Fairway Trl

City State Zip Code
 Moreland Hills OH 44022-2378

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

Name of Employer Occupation
 Jainco President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016

Transaction ID : VNVTSEF6KQ2

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 60 Lochspur Ln

City State Zip Code
 Moreland Hills OH 44022-2310

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

Name of Employer Occupation
 None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : VNVTSED2K37

Amount of Each Receipt this Period
 50.00

Memo Item

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

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

550.00

**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 6 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Amiya Banerjee

Mailing Address 60 Lochspur Ln

City State Zip Code
Moreland Hills OH 44022-2310

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 15 / 2016

Transaction ID : VNVTSEFKT07

Amount of Each Receipt this Period
 _____ **250.00**

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 19 / 2016

Transaction ID : VNVTSEFKT07E

Amount of Each Receipt this Period
 _____ **250.00**

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Brett R. Barragate

Mailing Address 19115 Shaker Blvd

City State Zip Code
Shaker Heights OH 44122-2545

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

Name of Employer Occupation
Jones Day Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2016

Transaction ID : VNVTSEF67P9

Amount of Each Receipt this Period
 _____ **500.00**

Memo Item

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)	PAGE 7 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Irving H. Berliner

Mailing Address 200 Public Sq
Ste 3500

City Cleveland State OH Zip Code 44114-2317

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2016

Transaction ID : VNVTSedQ8X6

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mark A. Binstock

Mailing Address 60 Berkshire Park Dr

City Chagrin Falls State OH Zip Code 44022-3500

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

Name of Employer Ohio Permanente Medical Group Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
06 / 21 / 2016

Transaction ID : VNVtSEER702

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Patricia A Blackmon

Mailing Address 18544 N Winding Oak Dr

City Middlebrg Hts State OH Zip Code 44130-4885

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

Name of Employer State of Ohio Occupation Judge, 8th District Court of Appeals

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2016

Transaction ID : VNVtSEE8RF4

Amount of Each Receipt this Period
500.00

Memo Item

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: PAGE 8 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Stanley Blum

Mailing Address 26400 George Zeiger Dr
Apt 316

City Beachwood State OH Zip Code 44122-7512

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2016

Transaction ID : VNVTSEF6HC2

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 530 Battles Rd

City Gates Mills State OH Zip Code 44040-9767

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2016

Transaction ID : VNVTSEEH4P7

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Steven J. Boone

Mailing Address 1780 Welsh Hills Rd

City Granville State OH Zip Code 43023-9323

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

Name of Employer RLJ Management Company, Inc. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : VNVTSEDVGS2

Amount of Each Receipt this Period
 2700.00

Memo Item

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

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

3950.00

**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 9 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Michael E. Burton

Mailing Address 2441 Findley Ave

City Columbus State OH Zip Code 43202-2917

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2016

Transaction ID : VNVTSEFKT23

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2016

Transaction ID : VNVTSEFKT23E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Marilyn B. Cagin

Mailing Address 2898 Lander Rd

City Pepper Pike State OH Zip Code 44124-4820

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : VNVTSEDVH15

Amount of Each Receipt this Period
250.00

Memo Item

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 10 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Gerald K. Carlisle Esq.

Mailing Address 7609 Glen Echo Dr

City Gates Mills State OH Zip Code 44040-9772

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

Name of Employer Ohio Title Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2016

Transaction ID : VNVTSEDQT04

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
John J. Carney

Mailing Address 20664 Beach Cliff Blvd

City Rocky River State OH Zip Code 44116-1321

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

Name of Employer Landmark RE Management Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2016

Transaction ID : VNVTSEEQWK1

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

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

Mailing Address 30285 Bruce Industrial Pkwy Ste B

City Solon State OH Zip Code 44139-3900

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

Name of Employer ID Agency, Inc. Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 269.51

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : VNVTSED6GG4

Amount of Each Receipt this Period
 _____ 19.51

Memo Item

* Earmarked Contribution: See Below

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

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

_____ 1519.51

**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 115
	<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)
Citizens for Michael Wager

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y
05 / 22 / 2016

Transaction ID : VNVTS6GG4E

Amount of Each Receipt this Period
 _____ **19.51**

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 30285 Bruce Industrial Pkwy
Ste B

City Solon State OH Zip Code 44139-3900

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

Name of Employer Occupation
ID Agency, Inc. Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
289.02

Date of Receipt
 M M / D D / Y Y Y Y
06 / 17 / 2016

Transaction ID : VNVTSFKSW5

Amount of Each Receipt this Period
 _____ **19.51**

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y
06 / 19 / 2016

Transaction ID : VNVTSFKSW5E

Amount of Each Receipt this Period
 _____ **19.51**

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

_____ **19.51**

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

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

FOR LINE NUMBER: PAGE 12 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Diane Cerino

Mailing Address 7919 Augusta Ln

City Painesville State OH Zip Code 44077-9193

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

Name of Employer None Occupation Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2016

Transaction ID : VNVTSEF64G5

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

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

Mailing Address 3880 Ellendale Rd

City Moreland Hills State OH Zip Code 44022-1124

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

Name of Employer None Occupation Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2016

Transaction ID : VNVTSEDHVV2

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer _____ Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2016

Transaction ID : VNVTSEDHVV2E

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

Note: Above Contribution earmarked through this organization.

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 13 OF 115
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Joanne R. Cohen

Mailing Address 19103 N Park Blvd

City State Zip Code
Shaker Heights OH 44122-1814

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Cleveland Clinic Curator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSEF64C3

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Mary Anne Comotto

Mailing Address 3375 Napa Blvd

City State Zip Code
Avon OH 44011-2591

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Schaffer Partners Inc. Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSEF67K5

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 279 N Columbia Ave

City State Zip Code
Columbus OH 43209-1417

FEC ID number of contributing federal political committee.

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSEF6KV4

Amount of Each Receipt this Period

Memo Item

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

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 14 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Michael Cristal

Mailing Address 2830 Attleboro Rd

City State Zip Code
Shaker Heights OH 44120-1814

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

Name of Employer Occupation
Risk International Area Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 22 / 2016

Transaction ID : VNVTSEC8H11

Amount of Each Receipt this Period
2700.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 24 / 2016

Transaction ID : VNVTSEC8H11E

Amount of Each Receipt this Period
2700.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Denise Debartolo-York

Mailing Address 4380 Pebble Beach Dr

City State Zip Code
Canfield OH 44406-9045

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

Name of Employer Occupation
San Francisco 49ers Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : VNVTSEF8PP3

Amount of Each Receipt this Period
500.00

Memo Item

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

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

3200.00

**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 15 OF 115

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
David Denes

Mailing Address 2634 Burridge Cir

City State Zip Code
 Twinsburg OH 44087-3000

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

Name of Employer Occupation
 Acme Express, Inc. Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2016

Transaction ID : VNVTSEF6HZ0

Amount of Each Receipt this Period
 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Steven M. Dettelbach

Mailing Address 6366 Creekside Trl

City State Zip Code
 Solon OH 44139-3102

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

Name of Employer Occupation
 US Department of Justice U.S. Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016

Transaction ID : VNVTSEF8C75

Amount of Each Receipt this Period
 1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Leslie D. Dunn

Mailing Address 2849 Glengary Rd

City State Zip Code
 Shaker Hts OH 44120-1730

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

Name of Employer Occupation
 Self Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : VNVTSEDQ SX0

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

2250.00

**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 16 OF 115

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
E. L. Eversman

Mailing Address 846 N Cleveland Massillon Rd

City Akron State OH Zip Code 44333-2181

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2016

Transaction ID : VNVTSEBEJ19

Amount of Each Receipt this Period
 500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2016

Transaction ID : VNVTSEBEJ19E

Amount of Each Receipt this Period
 500.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
E. L. Eversman

Mailing Address 846 N Cleveland Massillon Rd

City Akron State OH Zip Code 44333-2181

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016

Transaction ID : VNVTSEF6KJ3

Amount of Each Receipt this Period
 500.00

Memo Item

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 17 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Mark Freeman

Mailing Address 20001 S Woodland Rd

City State Zip Code
Shaker Heights OH 44122-2867

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2016

Transaction ID : VNVTSEE1K58

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 29450 N Park Blvd

City State Zip Code
Solon OH 44139-1193

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

Name of Employer Occupation
Self Employed Oral Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2016

Transaction ID : VNVTSEDQ8R7

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 100 Ridgecreek Trl

City State Zip Code
Moreland Hills OH 44022-2379

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

Name of Employer Occupation
Garson Johnson LLC Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2016

Transaction ID : VNVTSEF6440

Amount of Each Receipt this Period
 1000.00

Memo Item

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 18 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Steven Glazer

Mailing Address 5301 Wisconsin Ave NW
Ste 740

City Washington State DC Zip Code 20015-2015

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

Name of Employer: Glazer Winston Honigman Ellick
Occupation: Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 05 / 10 / 2016

Transaction ID : VNVTSECYC09

Amount of Each Receipt this Period: 2000.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer: Conduit total listed in Agg. field
Occupation: Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 22487.87

Date of Receipt: 05 / 15 / 2016

Transaction ID : VNVTSECYC09E

Amount of Each Receipt this Period: 2000.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Robert D. Gries

Mailing Address 1801 E 9th St
Ste 1600

City Cleveland State OH Zip Code 44114-3188

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

Name of Employer: None
Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 06 / 30 / 2016

Transaction ID : VNVTSEF8CB7

Amount of Each Receipt this Period: 2000.00

Memo Item

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: (check only one)	PAGE 19 OF 115
	<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)
Citizens for Michael Wager

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

Mailing Address 2685 Rochester Rd

City Shaker Heights State OH Zip Code 44122-2164

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

Name of Employer Zenith Systems LLC Occupation Electrical Contractor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2016

Transaction ID : VNVTSEENCB5

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 5150 Three Village Dr Apt 1B

City Lyndhurst State OH Zip Code 44124-3771

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2016

Transaction ID : VNVTSEBEHT4

Amount of Each Receipt this Period
100.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2016

Transaction ID : VNVTSEBEHT4E

Amount of Each Receipt this Period
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

350.00

**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 115
	<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)
Citizens for Michael Wager

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

Mailing Address 5150 Three Village Dr
Apt 1B

City Lyndhurst State OH Zip Code 44124-3771

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 18 / 2016

Transaction ID : VNVTSEC8GT6

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : VNVTSEC8GT6E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Robert T. Hexter

Mailing Address 5150 Three Village Dr
Apt 1B

City Lyndhurst State OH Zip Code 44124-3771

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016

Transaction ID : VNVTSEC87Y5

Amount of Each Receipt this Period
100.00

Memo Item

* Earmarked Contribution: See Below

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

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

350.00

**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 115
	<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)
Citizens for Michael Wager

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 08 / 2016

Transaction ID : VNVTSECS7Y5E

Amount of Each Receipt this Period
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 5150 Three Village Dr
Apt 1B

City Lyndhurst State OH Zip Code 44124-3771

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 08 / 2016

Transaction ID : VNVTSEDVH31

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Robert T. Hexter

Mailing Address 5150 Three Village Dr
Apt 1B

City Lyndhurst State OH Zip Code 44124-3771

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 14 / 2016

Transaction ID : VNVTSEENC90

Amount of Each Receipt this Period
250.00

Memo Item

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

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

500.00

**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 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Cory Hoffman

Mailing Address 4507 Briarwood Dr

City Lorain State OH Zip Code 44053-3130

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
201.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : VNVTS6GR7

Amount of Each Receipt this Period
201.60

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : VNVTS6GR7E

Amount of Each Receipt this Period
201.60

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Carole F. Hoover

Mailing Address 2 Bratenahl Pl Apt 7A

City Bratenahl State OH Zip Code 44108-1171

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

Name of Employer Hoover Milstein Occupation President & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2016

Transaction ID : VNVTS6GR7E

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

1201.60

**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 23 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Rick Inatome

Mailing Address PO Box 1795

City Naples State FL Zip Code 34106-1795

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

Name of Employer Infilaw Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2016

Transaction ID : VNVTSEDDFN9

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 4355 Valley Woods Dr

City Independence State OH Zip Code 44131-5235

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2016

Transaction ID : VNVTSSEFKTY2

Amount of Each Receipt this Period
100.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2016

Transaction ID : VNVTSSEFKTY2E

Amount of Each Receipt this Period
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 24 OF 115

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Anne K. Jeffrey

Mailing Address 296 Ashbourne Pl

City Columbus State OH Zip Code 43209-1449

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

Name of Employer None Occupation Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : VNVTS6GN3

Amount of Each Receipt this Period
 250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : VNVTS6GN3E

Amount of Each Receipt this Period
 250.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Anne K. Jeffrey

Mailing Address 296 Ashbourne Pl

City Columbus State OH Zip Code 43209-1449

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

Name of Employer None Occupation Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2016

Transaction ID : VNVTS6GN3E

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

500.00

**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 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Joyce E. Jentoft

Mailing Address 12764 Girdled Rd

City Painesville State OH Zip Code 44077-8710

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

Name of Employer Self Employed Occupation Independent Apparel & Fashion Professi

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 28 / 2016

Transaction ID : VNVTSEF4D50

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1259 W Hill Dr

City Gates Mills State OH Zip Code 44040-9636

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

Name of Employer Walter and Jean Kalberer Foundation Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : VNVTSEF8V84

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1660 W 2nd St

City Cleveland State OH Zip Code 44113-1454

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

Name of Employer Ulmer & Berne LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 28 / 2016

Transaction ID : VNVTSEF6499

Amount of Each Receipt this Period
250.00

Memo Item

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 26 OF 115

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

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

Mailing Address 1260 N Astor St

City Chicago State IL Zip Code 60610-2308

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

Name of Employer Senior Lifestyle Corp. Occupation Real Estate Developer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 MM / DD / YYYY
 06 / 28 / 2016

Transaction ID : VNVTSEF6JT3

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 2830 Sedgewick Rd

City Shaker Hts State OH Zip Code 44120-1838

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

Name of Employer Baker & Hostetler LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 MM / DD / YYYY
 06 / 07 / 2016

Transaction ID : VNVTSEE1JZ0

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 1589 E 118th St

City Cleveland State OH Zip Code 44106-4426

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

Name of Employer Hyatt Legal Plans Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 MM / DD / YYYY
 06 / 15 / 2016

Transaction ID : VNVTSEEHR95

Amount of Each Receipt this Period
 250.00

Memo Item

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 27 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Alan Krause

Mailing Address 3333 Richmond Rd
Ste 350

City Beachwood State OH Zip Code 44122-4196

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

Name of Employer Mid America Management Corporation Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
537.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2016

Transaction ID : VNVTSEG20Y7

Amount of Each Receipt this Period
337.50

Memo Item

* In-Kind: Rent

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

Mailing Address 3333 Richmond Rd
Ste 350

City Beachwood State OH Zip Code 44122-4196

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

Name of Employer Mid America Management Corporation Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
875.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : VNVTSEG20Z5

Amount of Each Receipt this Period
337.50

Memo Item

* In-Kind: Rent

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

Mailing Address 3333 Richmond Rd
Ste 350

City Beachwood State OH Zip Code 44122-4196

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

Name of Employer Mid America Management Corporation Occupation Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1212.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : VNVTSEG2103

Amount of Each Receipt this Period
337.50

Memo Item

* In-Kind: Rent

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

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

1012.50

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

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

FOR LINE NUMBER: PAGE 28 OF 115
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Richard L. Lavoie

Mailing Address 7165 Colesbrooke Dr

City State Zip Code
Hudson OH 44236-1170

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

Name of Employer Occupation
University of Akron, Law School Professor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 28 / 2016

Transaction ID : VNVTS EDHVT4

Amount of Each Receipt this Period
 250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2016

Transaction ID : VNVTS EDHVT4E

Amount of Each Receipt this Period
 250.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Kathleen K. Leavenworth

Mailing Address 15306 Hemlock Point Rd

City State Zip Code
Chagrin Falls OH 44022-3834

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2016

Transaction ID : VNVTS EE1K40

Amount of Each Receipt this Period
 500.00

Memo Item

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 29 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Norma Lerner

Mailing Address 37185 S Woodland Rd

City Chagrin Falls State OH Zip Code 44022-6817

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2016

Transaction ID : VNVTSECQYW1

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1585 Frederick Blvd

City Akron State OH Zip Code 44320-4000

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

Name of Employer LRC Realty Inc. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2016

Transaction ID : VNVTSEC8H03

Amount of Each Receipt this Period
2000.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : VNVTSEC8H03E

Amount of Each Receipt this Period
2000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

2250.00

**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 30 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Morton Q. Levin Esq.

Mailing Address 18901 N Park Blvd

City State Zip Code
Shaker Heights OH 44122-1810

FEC ID number of contributing federal political committee.

Name of Employer Occupation
The Levin Group, Inc President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSDEVHQ9

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Marcia W. Levine

Mailing Address 2678 Rochester Rd

City State Zip Code
Shaker Heights OH 44122-2165

FEC ID number of contributing federal political committee.

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSSEBNEZ3

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 5150 Three Village Dr
Apt 1G

City State Zip Code
Lyndhurst OH 44124-3750

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Not Employed Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSSEF6HK7

Amount of Each Receipt this Period

Memo Item

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

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 31 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Susan C. Levine

Mailing Address 5150 Three Village Dr
Apt 1G

City Lyndhurst State OH Zip Code 44124-3750

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2016

Transaction ID : VNVTSEF6KN6

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Toby D. Lewis

Mailing Address 5150 Three Village Dr
Apt 1E

City Lyndhurst State OH Zip Code 44124-3773

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 06 / 2016

Transaction ID : VNVTSEDVHR7

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4820 Stone Gate Blvd

City Akron State OH Zip Code 44333-4708

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

Name of Employer Sterling Jewelers Inc. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Transaction ID : VNVTSEC8GY8

Amount of Each Receipt this Period
1500.00

Memo Item

* Earmarked Contribution: See Below

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

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

2250.00

**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 32 OF 115
	<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)
Citizens for Michael Wager

A. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address 366 Summer St
 City Somerville State MA Zip Code 02144-3132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016
Transaction ID : VNVTSEC8GY8E
 Amount of Each Receipt this Period
 1500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

B. Fred Livingstone
 Full Name (Last, First, Middle Initial)
 Mailing Address 13415 Shaker Blvd Apt 8A1
 City Cleveland State OH Zip Code 44120-5616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Retired
 None
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2016
Transaction ID : VNVTSED6GT3
 Amount of Each Receipt this Period
 250.00
 Memo Item
 * Earmarked Contribution: See Below

C. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address 366 Summer St
 City Somerville State MA Zip Code 02144-3132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016
Transaction ID : VNVTSED6GT3E
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

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

250.00

**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 33 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Bruce Loessin

Mailing Address 5 Whisperwood Ln

City Chagrin Falls State OH Zip Code 44022-6659

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

Name of Employer Case Western Reserve University Occupation Senior Vice President, University Rela

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016

Transaction ID : VNVTSEF6416

Amount of Each Receipt this Period
350.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ken S. Lurie

Mailing Address 23875 Commerce Park Ste 140

City Beachwood State OH Zip Code 44122-5805

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

Name of Employer The Orlean Company Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : VNVTSEF8CA9

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 2209 Landerhaven Ct

City Mayfield Hts State OH Zip Code 44124-4181

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 09 / 2016

Transaction ID : VNVTSEE8RK5

Amount of Each Receipt this Period
250.00

Memo Item

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 34 OF 115
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Daniel Markowitz

Mailing Address 2822 Lakeland Pkwy

City State Zip Code
Silver Lake OH 44224-2919

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

Name of Employer Occupation
ARCADIS Environmental Scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 17 2016

Transaction ID : VNVTS6GD0

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 22 2016

Transaction ID : VNVTS6GD0E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 2822 Lakeland Pkwy

City State Zip Code
Silver Lake OH 44224-2919

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

Name of Employer Occupation
ARCADIS Environmental Scientist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : VNVTS6GD0E

Amount of Each Receipt this Period
50.00

Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 35 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Jeffrey A. Marks

Mailing Address 63 W Hill Ln

City State Zip Code
Cincinnati OH 45215-4213

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

Name of Employer Occupation
Vorys Sater Seymour Pease Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016

Transaction ID : VNVTSECS8A9

Amount of Each Receipt this Period
 250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2016

Transaction ID : VNVTSECS8A9E

Amount of Each Receipt this Period
 250.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Fred W. Martin

Mailing Address 228 Southwick Ln

City State Zip Code
Aurora OH 44202-8541

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

Name of Employer Occupation
Fred Martin Ford, Inc. President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2016

Transaction ID : VNVTSEER6S7

Amount of Each Receipt this Period
 500.00

Memo Item

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 36 OF 115
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Christopher McCracken

Mailing Address 2528 Stratford Rd

City Cleveland Hts State OH Zip Code 44118-4040

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

Name of Employer Ulmer & Berne LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : VNVTSedQSS8

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

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

Mailing Address 2528 Stratford Rd

City Cleveland Hts State OH Zip Code 44118-4040

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

Name of Employer Ulmer & Berne LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : VNVtSEFMJQ9

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

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

Mailing Address 20011 N Park Blvd

City Shaker Heights State OH Zip Code 44118-5001

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

Name of Employer Graffiti Caps, LLC Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2016

Transaction ID : VNVtSEAQ6A5

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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: PAGE 37 OF 115
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Roy Minoff

Mailing Address 10 Trolley Trl

City State Zip Code
Moreland Hills OH 44022-1979

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
06 07 2016

Transaction ID : VNVTSFKSH8

Amount of Each Receipt this Period
550.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
M M / D D / Y Y Y Y
06 12 2016

Transaction ID : VNVTSFKSH8E

Amount of Each Receipt this Period
550.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 2923 Creekview Ln

City State Zip Code
Avon OH 44011-2282

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

Name of Employer Occupation
Miraldi & Barrett Co LPA Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 26 2016

Transaction ID : VNVTSDDFP7

Amount of Each Receipt this Period
250.00

Memo Item

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

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

800.00

**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 38 OF 115
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Kenneth C. Moore		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2016	
Mailing Address 15602 Edgewater Dr		Transaction ID : VNVTSEDDFS0	
City Lakewood	State OH	Zip Code 44107-1212	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Squires, Sanders & Dempsey, LLP	Occupation Attorney		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) B. Mario M. Morino		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2016	
Mailing Address 19111 Detroit Rd Ste 305		Transaction ID : VNVTSECYAA2	
City Rocky River	State OH	Zip Code 44116-1740	Amount of Each Receipt this Period _____ 2500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Morino Ventures LLC	Occupation Chief Executive Officer		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

Full Name (Last, First, Middle Initial) C. Roland W Moskowitz		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2016	
Mailing Address 32050 Pinetree Rd		Transaction ID : VNVTSEDQSV4	
City Pepper Pike	State OH	Zip Code 44124-5900	Amount of Each Receipt this Period _____ 350.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer Case Western Reserve University	Occupation Physician		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 3850.00
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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 39 OF 115

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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Diana Nazelli

Mailing Address 40 Hastings Ln

City State Zip Code
 Chagrin Falls OH 44022-3246

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

Name of Employer Occupation
 NextGen Resale Systems, LLC Owner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2016

Transaction ID : VNVTSECS876

Amount of Each Receipt this Period
 250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
 Somerville MA 02144-3132

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

Name of Employer Occupation
 Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2016

Transaction ID : VNVTSECS876E

Amount of Each Receipt this Period
 250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 3902 Peartree Pl

City State Zip Code
 Calabasas CA 91302-1852

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

Name of Employer Occupation
 The CW Network EVP/CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 25 / 2016

Transaction ID : VNVTSEDHVS6

Amount of Each Receipt this Period
 250.00

Memo Item

* Earmarked Contribution: See Below

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

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

500.00

**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 40 OF 115
	<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)
Citizens for Michael Wager

A. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address 366 Summer St
 City Somerville State MA Zip Code 02144-3132
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 29 / 2016
Transaction ID : VNVTS EDHVS6E
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

B. Sharen Swartz Neuhardt
 Full Name (Last, First, Middle Initial)
 Mailing Address Austin Landing Suite 400
 City Dayton State OH Zip Code 45392
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation Partner - Lawyer
 Thompson Hine
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2016
Transaction ID : VNVTS EFKTX4
 Amount of Each Receipt this Period
 250.00
 Memo Item
 * Earmarked Contribution: See Below

C. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address 366 Summer St
 City Somerville State MA Zip Code 02144-3132
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2016
Transaction ID : VNVTS EFKTX4E
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

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

250.00

**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 41 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Stephen M. O'Bryan

Mailing Address 18962 Schlather Ln

City Rocky River State OH Zip Code 44116-2858

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

Name of Employer Taft, Stettinius & Hollister LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : VNVTS EDV GQ6

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 38700 Jackson Rd

City Moreland Hills State OH Zip Code 44022-2011

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

Name of Employer Nurenberg, Paris, Heller & McCarthy Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2016

Transaction ID : VNVTS EDQ SF9

Amount of Each Receipt this Period
750.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Deborah W Paris

Mailing Address 22 Lyman Cir

City Shaker Hts State OH Zip Code 44122-2111

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

Name of Employer Self Employed Occupation Licensed Independent Social Worker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2016

Transaction ID : VNVTS EF6 HT2

Amount of Each Receipt this Period
500.00

Memo Item

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 42 OF 115

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Frances G G. Pepper

Mailing Address 233 Oliver Rd

City State Zip Code
 Cincinnati OH 45215-2638

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

Name of Employer Occupation
 None Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : VNVTSEE1K16

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 3010 Kersdale Rd

City State Zip Code
 Pepper Pike OH 44124-5350

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

Name of Employer Occupation
 Alex N Sill Company President & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016

Transaction ID : VNVTSECS818

Amount of Each Receipt this Period
 250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
 Somerville MA 02144-3132

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

Name of Employer Occupation
 Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2016

Transaction ID : VNVTSECS818E

Amount of Each Receipt this Period
 250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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: PAGE 43 OF 115
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Charlene Phelps

Mailing Address 16557 Merrill Ct

City State Zip Code
Chagrin Falls OH 44023-1159

FEC ID number of contributing federal political committee.

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Transaction ID : VNVTSDEVHT2

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 7147 Bingham Ln

City State Zip Code
Chagrin Falls OH 44023-1164

FEC ID number of contributing federal political committee.

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Transaction ID : VNVTSDEHVR9

Amount of Each Receipt this Period

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

FEC ID number of contributing federal political committee.

Name of Employer Occupation
None Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Transaction ID : VNVTSDEHVR9E

Amount of Each Receipt this Period

Memo Item

Note: Above Contribution earmarked through this organization.

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

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: PAGE 44 OF 115
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Margaret Seidler Ransohoff

Mailing Address 19850 Marchmont Rd

City State Zip Code
Shaker Heights OH 44122-2849

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

Name of Employer Occupation
None Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 / /

Transaction ID : VNVTS EDVH98

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 17300 Parkland Dr

City State Zip Code
Shaker Hts OH 44120-2552

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

Name of Employer Occupation
None Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 / /

Transaction ID : VNVTS EFH9T0

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 19750 Shaker Blvd

City State Zip Code
Shaker Heights OH 44122-1866

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

Name of Employer Occupation
Forest City Enterprises Real Estate Executive

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 / /

Transaction ID : VNVTS EFH9X4

Amount of Each Receipt this Period

Memo Item

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

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 45 OF 115
	<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)
Citizens for Michael Wager

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

Mailing Address 17300 Parkland Dr

City Shaker Hts State OH Zip Code 44120-2552

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

Name of Employer Forest City Enterprises, Inc. Occupation Executive Vice President and Director

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : VNVTSEFHK8

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Robert H. Rawson Jr.

Mailing Address 21300 Brantley Rd

City Shaker Heights State OH Zip Code 44122-1936

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

Name of Employer Jones Day Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2016

Transaction ID : VNVTSEF4D28

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
David K. Ream

Mailing Address 9519 Greystone Pkwy

City Brecksville State OH Zip Code 44141-2939

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

Name of Employer Leverage Technologies Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : VNVTSEF8PK2

Amount of Each Receipt this Period
250.00

Memo Item

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

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

3450.00

**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 46 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Richard S. Rivitz

Mailing Address 130 Woodburn Dr

City State Zip Code
Moreland Hills OH 44022-6845

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Taft Stettinius & Hollister, LLP Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSECQY77

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Robert S. Belovich Attorney, LLC

Mailing Address 9100 S Hills Blvd
Ste 325

City State Zip Code
Broadview Heights OH 44147-3508

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSEFQEJ4

Amount of Each Receipt this Period

Memo Item

LLC - Members below if itemized. Permissible funds.

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

Mailing Address 7772 Sunstone Dr

City State Zip Code
Brecksville OH 44141-2170

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Kronenberg & Belovich Law Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSEEQWJ3

Amount of Each Receipt this Period

Memo Item

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

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: PAGE 47 OF 115
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Robin Rood

Mailing Address 113 Silver Springs Trl

City State Zip Code
Chagrin Falls OH 44022-4274

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

Name of Employer Occupation
Rood Nutrition Counseling Registered Dietician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2016

Transaction ID : VNVTSEENCE9

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 9140 Vendome Dr

City State Zip Code
Bethesda MD 20817-4021

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

Name of Employer Occupation
Palisades Associates, Inc. Merchant Banker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : VNVTSEFKV23

Amount of Each Receipt this Period
 1000.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : VNVTSEFKV23E

Amount of Each Receipt this Period
 1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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 48 OF 115
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Judith Rosman

Mailing Address 40 N Strawberry Ln

City Moreland Hills State OH Zip Code 44022-1277

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

Name of Employer RosmanSearch, Inc. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2016

Transaction ID : VNVTSECS7T3

Amount of Each Receipt this Period
200.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2016

Transaction ID : VNVTSECS7T3E

Amount of Each Receipt this Period
200.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 40 N Strawberry Ln

City Moreland Hills State OH Zip Code 44022-1277

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

Name of Employer RosmanSearch, Inc. Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2016

Transaction ID : VNVTSEF64E9

Amount of Each Receipt this Period
250.00

Memo Item

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

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

450.00

**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 49 OF 115

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

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

Mailing Address 23220 Chagrin Blvd
 Apt 364

City Beachwood State OH Zip Code 44122-5453

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

Name of Employer Challenger Partners, LLC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016

Transaction ID : VNVTSEF6J23

Amount of Each Receipt this Period
 1700.00

Memo Item

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

Mailing Address 7185 Settlers Ridge Rd

City Gates Mills State OH Zip Code 44040-9631

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

Name of Employer Breakthrough Schools Occupation Chief Executive Officer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : VNVTSEDQSY8

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 27070 Cedar Rd
 Apt 382

City Beachwood State OH Zip Code 44122-8145

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : VNVTSEDRSW1

Amount of Each Receipt this Period
 1000.00

Memo Item

* Earmarked Contribution: See Below

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

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

3700.00

**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 50 OF 115
	<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)
Citizens for Michael Wager

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

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2016

Transaction ID : VNVTSEDRSW1E

Amount of Each Receipt this Period
 1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 2911 S Park Blvd

City Shaker Hts State OH Zip Code 44120-1842

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

Name of Employer Occupation
Neuro Health and Wellness Oral and Maxillofacial Surgeon

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 16 / 2016

Transaction ID : VNVTSEENBE8

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 7905 Victoria Cir

City Independence State OH Zip Code 44131-4892

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

Name of Employer Occupation
Rutter & Russin, LLC Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : VNVTSEDQSW2

Amount of Each Receipt this Period
 500.00

Memo Item

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 51 OF 115
	<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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Donald Scherzer

Mailing Address 3117 Laurel Rd

City State Zip Code
Shaker Heights OH 44120-2523

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Roetzel & Address Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSECS891

Amount of Each Receipt this Period

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSECS891E

Amount of Each Receipt this Period

Memo Item

Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Richard A. Schlesinger

Mailing Address 1885 Eucalyptus Ave

City State Zip Code
Encinitas CA 92024-1106

FEC ID number of contributing federal political committee.

Name of Employer Occupation
The Next Chapter CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVTSEE1JT1

Amount of Each Receipt this Period

Memo Item

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

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: PAGE 52 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Howard J. Sedran

Mailing Address 614 Spruce St

City Philadelphia State PA Zip Code 19106-4114

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2016

Transaction ID : VNVTSEBNF01

Amount of Each Receipt this Period
 _____ 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Gary S Shamis

Mailing Address 55 Winding River Trl

City Bentleyville State OH Zip Code 44022-3607

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

Name of Employer Saltz, Shamis & Goldfarb Occupation Accountant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2016

Transaction ID : VNVTSEEW3Z0

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Christina A. Sibilla

Mailing Address 25 Ridgecreek Trl

City Moreland Hills State OH Zip Code 44022-2379

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2016

Transaction ID : VNVTSEDVHVO

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

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

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

_____ 3450.00

**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 53 OF 115
	<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)
Citizens for Michael Wager

A. Jack Staph
Full Name (Last, First, Middle Initial)
Mailing Address 40 Old Som Ln
City Moreland Hills State OH Zip Code 44022-6869
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Lawyer
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date **700.00**

Date of Receipt **05 / 02 / 2016**
Transaction ID : VNVTSECS7Z2
Amount of Each Receipt this Period **200.00**
 Memo Item
* Earmarked Contribution: See Below

B. ActBlue
Full Name (Last, First, Middle Initial)
Mailing Address 366 Summer St
City Somerville State MA Zip Code 02144-3132
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Conduit total listed in Agg. field
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date **22487.87**

Date of Receipt **05 / 08 / 2016**
Transaction ID : VNVTSECS7Z2E
Amount of Each Receipt this Period **200.00**
 Memo Item
Note: Above Contribution earmarked through this organization.

C. David J. Strauss
Full Name (Last, First, Middle Initial)
Mailing Address 29999 Orangewood Dr
City Beachwood State OH Zip Code 44122-4718
FEC ID number of contributing federal political committee. **C**
Name of Employer Baker & Hostetler Occupation Attorney
Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date **250.00**

Date of Receipt **05 / 18 / 2016**
Transaction ID : VNVTSED2K45
Amount of Each Receipt this Period **250.00**
 Memo Item

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

450.00

**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 54 OF 115

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Thomas Tagliamonte

Mailing Address 6578 Hudson Ave

City Mentor State OH Zip Code 44060-4545

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

Name of Employer The Lubrizol Corporation Occupation Technology Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 MM / DD / YYYY
 06 / 22 / 2016

Transaction ID : VNVTSSESYH6

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
David P. Tschantz

Mailing Address 275 Springside Dr Ste 300

City Akron State OH Zip Code 44333-4550

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

Name of Employer Peters Tschantz & Associates Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 MM / DD / YYYY
 06 / 29 / 2016

Transaction ID : VNVTSSEF67J7

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 65 Ridgescreek Trl

City Moreland Hills State OH Zip Code 44022-2379

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 MM / DD / YYYY
 06 / 29 / 2016

Transaction ID : VNVTSSEF8C83

Amount of Each Receipt this Period
 250.00

Memo Item

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 55 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Les C Vinney

Mailing Address 85 W Juniper Ln

City State Zip Code
Moreland Hills OH 44022-1381

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

Name of Employer Occupation
None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016

Transaction ID : VNVTSEF6J65

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
William F.B. Vodrey

Mailing Address 2868 Chadbourne Rd

City State Zip Code
Cleveland OH 44120-2215

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

Name of Employer Occupation
Cleveland Municipal Court Magistrate

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016

Transaction ID : VNVTSECS800

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address 366 Summer St

City State Zip Code
Somerville MA 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2016

Transaction ID : VNVTSECS800E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

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 56 OF 115

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Albert Wager

Mailing Address 8 Saratoga Ct

City State Zip Code
 Beachwood OH 44122-7550

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

Name of Employer Occupation
 None Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : VNVTS EDVGW5

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 38001 Fairmount Blvd

City State Zip Code
 Chagrin Falls OH 44022-6619

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

Name of Employer Occupation
 None Not Employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016

Transaction ID : VNVTS EF0X10

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 30126 Saint Ives

City State Zip Code
 Westlake OH 44145-3790

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

Name of Employer Occupation
 Electronic Merchant Systems Chairman

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2016

Transaction ID : VNVTS EDQT12

Amount of Each Receipt this Period
 2700.00

Memo Item

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

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

3700.00

**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 57 OF 115
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Steven S Willensky		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2016	
Mailing Address 1937 Woodstock Rd		Transaction ID : VNVTS6GM6	
City Gates Mills	State OH	Zip Code 44040-9745	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer None	Occupation Retired	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

* Earmarked Contribution: See Below

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2016	
Mailing Address 366 Summer St		Transaction ID : VNVTS6GM6E	
City Somerville	State MA	Zip Code 02144-3132	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer	Occupation Conduit total listed in Agg. field	<input checked="" type="checkbox"/> Memo Item	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 22487.87		

Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial) C. Idelle K. Wolf		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2016	
Mailing Address 31050 Gates Mills Blvd		Transaction ID : VNVTSFKSM2	
City Cleveland	State OH	Zip Code 44124-4355	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer None	Occupation Not Employed	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	[Empty Field]

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

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

FOR LINE NUMBER: PAGE 58 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address 366 Summer St
 City Somerville State MA Zip Code 02144-3132
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation Conduit total listed in Agg. field
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 22487.87

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2016
Transaction ID : VNVTSEFKSM2E
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

B. Barbara Wolfort
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 Ridgecreek Trl
 City Chagrin Falls State OH Zip Code 44022-2379
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation Philanthropist
 Self Employed
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : VNVTSEFQM30
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Gerald E Zahler
 Full Name (Last, First, Middle Initial)
 Mailing Address 28601 Chagrin Blvd Ste 250
 City Beachwood State OH Zip Code 44122-4558
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation Retired
 None
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2016
Transaction ID : VNVTSEBNEW0
 Amount of Each Receipt this Period
 100.00
 Memo Item

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: PAGE 59 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
Gerald E Zahler

Mailing Address 28601 Chagrin Blvd
Ste 250

City Beachwood State OH Zip Code 44122-4558

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2016

Transaction ID : VNVTSSEQSZ6

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Gerald E Zahler

Mailing Address 28601 Chagrin Blvd
Ste 250

City Beachwood State OH Zip Code 44122-4558

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2016

Transaction ID : VNVTSEEH4G9

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3339 Tennyson St NW

City Washington State DC Zip Code 20015-2442

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

Name of Employer Buckleysandler Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2016

Transaction ID : VNVTSECS868

Amount of Each Receipt this Period
250.00

Memo Item

* Earmarked Contribution: See Below

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 60 OF 115
	<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)
Citizens for Michael Wager

A. ActBlue

Full Name (Last, First, Middle Initial)
Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
22487.87

Date of Receipt
MM / DD / YYYY
05 / 08 / 2016

Transaction ID : VNVTSECS868E

Amount of Each Receipt this Period
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Jeffrey Zimon

Full Name (Last, First, Middle Initial)
Mailing Address 32099 S Woodland Rd

City Pepper Pike State OH Zip Code 44124-5847

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

Name of Employer Occupation
Zimon LLC Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2016

Transaction ID : VNVTSEF7CT9

Amount of Each Receipt this Period
500.00

Memo Item

C. Jeffrey Zimon

Full Name (Last, First, Middle Initial)
Mailing Address 32099 S Woodland Rd

City Pepper Pike State OH Zip Code 44124-5847

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

Name of Employer Occupation
Zimon LLC Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2016

Transaction ID : VNVTSEFMJZ2

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1000.00

81153.12

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

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

FOR LINE NUMBER: PAGE 61 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
America Works PAC

Mailing Address **PO Box 76187**

City **Washington** State **DC** Zip Code **20013-6187**

FEC ID number of contributing federal political committee. **C C00331694**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 20 / 2016

Transaction ID : VNVTSEEQWM9

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ashtabula County Democratic Executive Committee

Mailing Address **478 Benjamin St**

City **Conneaut** State **OH** Zip Code **44030-1202**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 28 / 2016

Transaction ID : VNVTSEF64P2

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Committee to Reelect Judge Friedland

Mailing Address **7660 S Eastland Rd**

City **Berea** State **OH** Zip Code **44017-2827**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 28 / 2016

Transaction ID : VNVTSEFQEV5

Amount of Each Receipt this Period
250.00

Memo Item

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 62 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Geneva Area Democratic Executive Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 327
 City Geneva State OH Zip Code 44041-0327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2016
Transaction ID : VNVTSEF64Q0
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Machinists Non-Partisan Political League
 Full Name (Last, First, Middle Initial)
 Mailing Address 9000 Machinists Pl
 City Upper Marlboro State MD Zip Code 20772-2675
 FEC ID number of contributing federal political committee. **C** C00002469
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2016
Transaction ID : VNVTSEDVHN3
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. National Committee for an Effective Congress
 Full Name (Last, First, Middle Initial)
 Mailing Address 218 D St SE
 FI 3
 City Washington State DC Zip Code 20003-1900
 FEC ID number of contributing federal political committee. **C** C00003558
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2016
Transaction ID : VNVTSEFRWJ4
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 * In-Kind: Research

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

2150.00
 7650.00

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

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

FOR LINE NUMBER: PAGE 63 OF 115
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

A. Full Name (Last, First, Middle Initial)
CustomInk, LLC

Mailing Address 7902 Westpark Dr

City McLean State VA Zip Code 22102-4202

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
393.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 11 / 2016

Transaction ID : VNVTSECQZS0

Amount of Each Receipt this Period
393.00

Memo Item

Refund

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

Memo Item

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

Memo Item

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

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

393.00

393.00

**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 64 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 8.89
City Cambridge	State MA Zip Code 02138-5106	
Purpose of Disbursement Merchant Bank Fees	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : VNTVH9T70Y0

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 0.40
City Cambridge	State MA Zip Code 02138-5106	
Purpose of Disbursement Merchant Bank Fees	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : VNTVH9T70X2

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 19.75
City Cambridge	State MA Zip Code 02138-5106	
Purpose of Disbursement Merchant Bank Fees	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : VNTVH9T70W4

SUBTOTAL of Disbursements This Page (optional).....	29.04
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 65 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 265.07
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Merchant Bank Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : VNTVH9T70V6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 10.28
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Merchant Bank Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : VNTVH9T70T8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 110.25
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Merchant Bank Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : VNTVH9T70S0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	385.60
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 66 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 94.01
City Cambridge	State MA Zip Code 02138-5106	
Purpose of Disbursement Merchant Bank Fees		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : VNTVH9T70R3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 137.52
City Cambridge	State MA Zip Code 02138-5106	
Purpose of Disbursement Merchant Bank Fees		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : VNTVH9T70Q5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 52.17
City Cambridge	State MA Zip Code 02138-5106	
Purpose of Disbursement Merchant Bank Fees		<input type="checkbox"/> Memo Item
Candidate Name		Transaction ID : VNTVH9T70P7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	283.70
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 67 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 39.50
City Cambridge	State MA Zip Code 02138-5106	
Purpose of Disbursement Merchant Bank Fees	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9T70N9
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 43.88
City Cambridge	State MA Zip Code 02138-5106	
Purpose of Disbursement Merchant Bank Fees	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9T70M1
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 40.67
City Cambridge	State MA Zip Code 02138-5106	
Purpose of Disbursement Merchant Bank Fees	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9T70K3
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	124.05
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 68 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 21.73
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Merchant Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016
Mailing Address 14 Arrow St Ste 11		Amount of Each Disbursement this Period 44.44
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Merchant Bank Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

Full Name (Last, First, Middle Initial) C. Amazon		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 293.85
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	360.02
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 69 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement MM / DD / YYYY 04 / 08 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 117.79
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9SW5M4
State: District:		

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement MM / DD / YYYY 04 / 08 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 114.11
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9SW5X5
State: District:		

Full Name (Last, First, Middle Initial) C. Amazon		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 49.78
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9SW5J9
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	281.68
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 70 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 31.74
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9SW5H1
State: District:		

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 34.24
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9SY2D0
State: District:		

Full Name (Last, First, Middle Initial) C. Amazon		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 15.00
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9SY2C2
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	80.98
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 71 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 49.96
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : VNTVH9SYVW1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 5.70
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : VNTVH9T1JY0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Amazon		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 18.96
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : VNTVH9T1JZ8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	74.62
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 72 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement MM / DD / YYYY 06 / 10 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 34.31
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T1JW4
State: District:		

Full Name (Last, First, Middle Initial) B. Amazon		Date of Disbursement MM / DD / YYYY 06 / 15 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 11.99
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T1JX2
State: District:		

Full Name (Last, First, Middle Initial) C. Amazon		Date of Disbursement MM / DD / YYYY 06 / 27 / 2016
Mailing Address PO Box 81226		Amount of Each Disbursement this Period 47.32
City Seattle	State WA	
Zip Code 98108-1300	Purpose of Disbursement Office Supplies	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T6ZY7
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	93.62
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 73 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2016
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 252.00
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Utilities	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9SY249
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2016
Mailing Address PO Box 6416		Amount of Each Disbursement this Period 140.41
City Carol Stream	State IL	
Zip Code 60197-6416	Purpose of Disbursement Utilities	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T1K06
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Campus Book & Supply		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address 112 S Lincoln St		Amount of Each Disbursement this Period 602.75
City Kent	State OH	
Zip Code 44240-3645	Purpose of Disbursement Advertising	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9SX9H8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	995.16
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 74 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Christopher Clevenger			Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016		
Mailing Address 1634 E Main St Apt 106			Amount of Each Disbursement this Period 53.33		
City Kent	State OH	Zip Code 44240-2885	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Reimbursement - See Details		Category/ Type	Transaction ID : VNTVH9SVRM6		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Christopher Clevenger			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2016		
Mailing Address 1634 E Main St Apt 106			Amount of Each Disbursement this Period 23.25		
City Kent	State OH	Zip Code 44240-2885	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Reimbursement - See Details		Category/ Type	Transaction ID : VNTVH9SYVZ5		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Christopher Clevenger			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016		
Mailing Address 1634 E Main St Apt 106			Amount of Each Disbursement this Period 24.25		
City Kent	State OH	Zip Code 44240-2885	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Reimbursement - See Details		Category/ Type	Transaction ID : VNTVH9SZZW7		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	100.83
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 75 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Christopher Clevenger		Date of Disbursement MM / DD / YYYY 06 / 16 / 2016
Mailing Address 1634 E Main St Apt 106		Amount of Each Disbursement this Period 60.00
City Kent	State OH	
Zip Code 44240-2885	Purpose of Disbursement Reimbursement - Data Usage	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T1GH1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Christopher Clevenger		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 1634 E Main St Apt 106		Amount of Each Disbursement this Period 122.97
City Kent	State OH	
Zip Code 44240-2885	Purpose of Disbursement Reimbursement - See Details	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T3544
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Christopher Clevenger		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 1634 E Main St Apt 106		Amount of Each Disbursement this Period 19.47
City Kent	State OH	
Zip Code 44240-2885	Purpose of Disbursement Mileage	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T7390
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	182.97
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 76 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Dominion East Ohio			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2016	
Mailing Address PO Box 26785			Amount of Each Disbursement this Period 255.97	
City Richmond	State VA	Zip Code 23261-6785	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Utilities		Category/ Type	Transaction ID : VNTVH9T6ZT6	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2016	
Mailing Address 156 University Ave			Amount of Each Disbursement this Period 25.43	
City Palo Alto	State CA	Zip Code 94301-1688	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : VNTVH9T1K47	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Facebook			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016	
Mailing Address 156 University Ave			Amount of Each Disbursement this Period 24.57	
City Palo Alto	State CA	Zip Code 94301-1688	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : VNTVH9T1K21	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	305.97
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 77 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Grange Mutual Casualty Company			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016	
Mailing Address PO Box 740604			Amount of Each Disbursement this Period 94.00	
City Cincinnati	State OH	Zip Code 45274-0604	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Insurance		Candidate Name	Transaction ID : VNTVH9SX9D7	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	Category/Type		

Full Name (Last, First, Middle Initial) B. Grange Mutual Casualty Company			Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2016	
Mailing Address PO Box 740604			Amount of Each Disbursement this Period 69.00	
City Cincinnati	State OH	Zip Code 45274-0604	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Insurance		Candidate Name	Transaction ID : VNTVH9SXC03	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	Category/Type		

Full Name (Last, First, Middle Initial) c. Grange Mutual Casualty Company			Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2016	
Mailing Address PO Box 740604			Amount of Each Disbursement this Period 94.00	
City Cincinnati	State OH	Zip Code 45274-0604	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Insurance		Candidate Name	Transaction ID : VNTVH9SZ1G9	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	Category/Type		

SUBTOTAL of Disbursements This Page (optional).....	257.00
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 78 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Grange Mutual Casualty Company			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2016		
Mailing Address PO Box 740604			Amount of Each Disbursement this Period 50.00		
City Cincinnati	State OH	Zip Code 45274-0604	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Insurance		Category/ Type			
Candidate Name		Transaction ID : VNTVH9T6ZS8			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Hotcards			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2016		
Mailing Address 2400 Superior Ave E			Amount of Each Disbursement this Period 113.94		
City Cleveland	State OH	Zip Code 44114-4236	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Advertising		Category/ Type			
Candidate Name		Transaction ID : VNTVH9SW690			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Hotcards			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016		
Mailing Address 2400 Superior Ave E			Amount of Each Disbursement this Period 256.77		
City Cleveland	State OH	Zip Code 44114-4236	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Advertising		Category/ Type			
Candidate Name		Transaction ID : VNTVH9SX9J6			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	420.71
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 79 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Hotcards		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016
Mailing Address 2400 Superior Ave E		Amount of Each Disbursement this Period 160.38
City Cleveland	State OH	
Zip Code 44114-4236	Purpose of Disbursement Advertising	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9SX9K4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hotcards		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2016
Mailing Address 2400 Superior Ave E		Amount of Each Disbursement this Period 302.94
City Cleveland	State OH	
Zip Code 44114-4236	Purpose of Disbursement Advertising	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9SX9S2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Hotcards		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2016
Mailing Address 2400 Superior Ave E		Amount of Each Disbursement this Period 27.54
City Cleveland	State OH	
Zip Code 44114-4236	Purpose of Disbursement Advertising	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T1JR2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	490.86
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 80 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Alan Krause		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2016
Mailing Address 3333 Richmond Rd Ste 350		Amount of Each Disbursement this Period 337.50
City Beachwood	State OH Zip Code 44122-4196	
Purpose of Disbursement Rent	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : VNVTSEG20Y7I * In-Kind Received

Full Name (Last, First, Middle Initial) B. Alan Krause		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address 3333 Richmond Rd Ste 350		Amount of Each Disbursement this Period 337.50
City Beachwood	State OH Zip Code 44122-4196	
Purpose of Disbursement Rent	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : VNVTSEG20Z5I * In-Kind Received

Full Name (Last, First, Middle Initial) C. Alan Krause		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016
Mailing Address 3333 Richmond Rd Ste 350		Amount of Each Disbursement this Period 337.50
City Beachwood	State OH Zip Code 44122-4196	
Purpose of Disbursement Rent	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	Transaction ID : VNVTSEG2103I * In-Kind Received

SUBTOTAL of Disbursements This Page (optional).....	1012.50
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 81 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Ashton C. Narzisi		Date of Disbursement MM / DD / YYYY 06 / 13 / 2016
Mailing Address 630 Eastwood Ave		Amount of Each Disbursement this Period 42.42
City Tallmadge	State OH Zip Code 44278-3139	
Purpose of Disbursement Reimbursement - Travel	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9T1217
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Ashton C. Narzisi		Date of Disbursement MM / DD / YYYY 06 / 27 / 2016
Mailing Address 630 Eastwood Ave		Amount of Each Disbursement this Period 16.03
City Tallmadge	State OH Zip Code 44278-3139	
Purpose of Disbursement Reimbursement -- Mileage	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9T30A0
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. National Committee for an Effective Congress		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 218 D St SE FI 3		Amount of Each Disbursement this Period 1000.00
City Washington	State DC Zip Code 20003-1900	
Purpose of Disbursement Research	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNVTSFRWJ4I * In-Kind Received
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1058.45
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 82 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 95.41
City Hudson	State OH	Zip Code 44236-1115	
Purpose of Disbursement Payroll Fees		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SW5P0
State: District:			

Full Name (Last, First, Middle Initial) B. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 1804.41
City Hudson	State OH	Zip Code 44236-1115	
Purpose of Disbursement Payroll		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SW5Q8
State: District:			

Full Name (Last, First, Middle Initial) c. Sharon Bennett			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016
Mailing Address 6166 Oakes Rd			Amount of Each Disbursement this Period 128.34
City Brecksville	State OH	Zip Code 44141-2633	
Purpose of Disbursement Salary		Category/ Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SW5T2 *
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1899.82
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 83 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Christopher Clevenger			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016		
Mailing Address 1634 E Main St Apt 106			Amount of Each Disbursement this Period 1056.32		
City Kent	State OH	Zip Code 44240-2885	<input type="checkbox"/> Memo Item Transaction ID : VNTVH9SW5R6 *		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Ashton C. Narzisi			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016		
Mailing Address 630 Eastwood Ave			Amount of Each Disbursement this Period 619.75		
City Tallmadge	State OH	Zip Code 44278-3139	<input checked="" type="checkbox"/> Memo Item Transaction ID : VNTVH9SW5S4 *		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016		
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 951.23		
City Hudson	State OH	Zip Code 44236-1115	<input type="checkbox"/> Memo Item Transaction ID : VNTVH9SW5V0		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	951.23
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 84 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 47.24
City Hudson	State OH	Zip Code 44236-1115	
Purpose of Disbursement Payroll Fees		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SX904
State: District:			

Full Name (Last, First, Middle Initial) B. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 2150.86
City Hudson	State OH	Zip Code 44236-1115	
Purpose of Disbursement Payroll		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SX912
State: District:			

Full Name (Last, First, Middle Initial) c. Sharon Bennett			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016
Mailing Address 6166 Oakes Rd			Amount of Each Disbursement this Period 474.79
City Brecksville	State OH	Zip Code 44141-2633	
Purpose of Disbursement Salary		Category/ Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SX920 *
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2198.10
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 85 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Christopher Clevenger			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016	
Mailing Address 1634 E Main St Apt 106			Amount of Each Disbursement this Period 1056.32	
City Kent	State OH	Zip Code 44240-2885	<input checked="" type="checkbox"/> Memo Item Transaction ID : VNTVH9SX938 *	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. Ashton C. Narzisi			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016	
Mailing Address 630 Eastwood Ave			Amount of Each Disbursement this Period 619.75	
City Tallmadge	State OH	Zip Code 44278-3139	<input checked="" type="checkbox"/> Memo Item Transaction ID : VNTVH9SX946 *	
Purpose of Disbursement Salary		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016	
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 1131.05	
City Hudson	State OH	Zip Code 44236-1115	<input type="checkbox"/> Memo Item Transaction ID : VNTVH9SX954	
Purpose of Disbursement Payroll Taxes		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	1131.05
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 86 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC			Date of Disbursement MM / DD / YYYY 05 / 18 / 2016
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 47.24
City Hudson	State OH	Zip Code 44236-1115	
Purpose of Disbursement Payroll Fees		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SYW35
State: District:			

Full Name (Last, First, Middle Initial) B. Paychex of New York LLC			Date of Disbursement MM / DD / YYYY 05 / 18 / 2016
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 2250.25
City Hudson	State OH	Zip Code 44236-1115	
Purpose of Disbursement Payroll		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SYZE8
State: District:			

Full Name (Last, First, Middle Initial) c. Sharon Bennett			Date of Disbursement MM / DD / YYYY 05 / 18 / 2016
Mailing Address 6166 Oakes Rd			Amount of Each Disbursement this Period 80.47
City Brecksville	State OH	Zip Code 44141-2633	
Purpose of Disbursement Salary		Category/ Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SYZF6 *
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2297.49
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 87 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Christopher Clevenger		Date of Disbursement MM / DD / YYYY 05 / 18 / 2016
Mailing Address 1634 E Main St Apt 106		Amount of Each Disbursement this Period 1406.00
City Kent	State OH	
Zip Code 44240-2885	Purpose of Disbursement Salary	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9SYZG4 *
State: District:		

Full Name (Last, First, Middle Initial) B. Ashton C. Narzisi		Date of Disbursement MM / DD / YYYY 05 / 18 / 2016
Mailing Address 630 Eastwood Ave		Amount of Each Disbursement this Period 763.78
City Tallmadge	State OH	
Zip Code 44278-3139	Purpose of Disbursement Salary	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9SYZH2 *
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex of New York LLC		Date of Disbursement MM / DD / YYYY 05 / 18 / 2016
Mailing Address 100 E Hines Hill Rd		Amount of Each Disbursement this Period 1308.69
City Hudson	State OH	
Zip Code 44236-1115	Purpose of Disbursement Payroll Taxes	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T0228
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1308.69
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 88 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC			Date of Disbursement MM / DD / YYYY 05 / 31 / 2016
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 3473.17
City Hudson	State OH	Zip Code 44236-1115	
Purpose of Disbursement Payroll		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9T0252
State: District:			

Full Name (Last, First, Middle Initial) B. Matthew Chernesky			Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address 448 Fleeter Ct			Amount of Each Disbursement this Period 542.13
City Kent	State OH	Zip Code 44240-3968	
Purpose of Disbursement Salary		Category/ Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9T02C7 *
State: District:			

Full Name (Last, First, Middle Initial) c. Christopher Clevenger			Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address 1634 E Main St Apt 106			Amount of Each Disbursement this Period 1742.07
City Kent	State OH	Zip Code 44240-2885	
Purpose of Disbursement Salary		Category/ Type	<input checked="" type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9T02A1 *
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3473.17
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 89 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Ashton C. Narzisi			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016		
Mailing Address 630 Eastwood Ave			Amount of Each Disbursement this Period 1188.97		
City Tallmadge	State OH	Zip Code 44278-3139	<input type="checkbox"/> Memo Item Transaction ID : VNTVH9T02B9 *		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016		
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 47.24		
City Hudson	State OH	Zip Code 44236-1115	<input type="checkbox"/> Memo Item Transaction ID : VNTVH9T0244		
Purpose of Disbursement Payroll Fees		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016		
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 2109.61		
City Hudson	State OH	Zip Code 44236-1115	<input type="checkbox"/> Memo Item Transaction ID : VNTVH9T0293		
Purpose of Disbursement Payroll Taxes		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	2156.85
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 90 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2016	
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 253.35	
City Hudson	State OH	Zip Code 44236-1115	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Insurance		Category/ Type	Transaction ID : VNTVH9T71A5	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2016	
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 3360.29	
City Hudson	State OH	Zip Code 44236-1115	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : VNTVH9T0S43	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Matthew Chernesky			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2016	
Mailing Address 448 Fleeter Ct			Amount of Each Disbursement this Period 474.79	
City Kent	State OH	Zip Code 44240-3968	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : VNTVH9T0S77	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3613.64
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 91 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Christopher Clevenger		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2016
Mailing Address 1634 E Main St Apt 106		Amount of Each Disbursement this Period 1722.49
City Kent	State OH	
Zip Code 44240-2885	Purpose of Disbursement Salary	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T0S51 *
State: District:		

Full Name (Last, First, Middle Initial) B. Ashton C. Narzisi		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2016
Mailing Address 630 Eastwood Ave		Amount of Each Disbursement this Period 1163.01
City Tallmadge	State OH	
Zip Code 44278-3139	Purpose of Disbursement Salary	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T0S69 *
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex of New York LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2016
Mailing Address 100 E Hines Hill Rd		Amount of Each Disbursement this Period 1971.07
City Hudson	State OH	
Zip Code 44236-1115	Purpose of Disbursement Payroll Taxes	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T0S85
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1971.07
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 92 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2016		
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 47.24		
City Hudson	State OH	Zip Code 44236-1115	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Payroll Fees		Category/ Type			
Candidate Name		Transaction ID : VNTVH9T0S93			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Paychex of New York LLC			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2016		
Mailing Address 100 E Hines Hill Rd			Amount of Each Disbursement this Period 3452.47		
City Hudson	State OH	Zip Code 44236-1115	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Payroll		Category/ Type			
Candidate Name		Transaction ID : VNTVH9T2TD0			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. Matthew Chernesky			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2016		
Mailing Address 448 Fleeter Ct			Amount of Each Disbursement this Period 474.79		
City Kent	State OH	Zip Code 44240-3968	Memo Item <input checked="" type="checkbox"/>		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name		Transaction ID : VNTVH9T2TG4			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	3499.71
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 93 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Christopher Clevenger		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 1634 E Main St Apt 106		Amount of Each Disbursement this Period 1722.48
City Kent	State OH	
Zip Code 44240-2885	Purpose of Disbursement Salary	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T2TE8 *
State: District:		

Full Name (Last, First, Middle Initial) B. Ashton C. Narzisi		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 630 Eastwood Ave		Amount of Each Disbursement this Period 1255.20
City Tallmadge	State OH	
Zip Code 44278-3139	Purpose of Disbursement Salary	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T2TF6 *
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex of New York LLC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 100 E Hines Hill Rd		Amount of Each Disbursement this Period 1900.62
City Hudson	State OH	
Zip Code 44236-1115	Purpose of Disbursement Payroll Taxes	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T2TH2
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1900.62
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 94 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Paychex of New York LLC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2016
Mailing Address 100 E Hines Hill Rd		Amount of Each Disbursement this Period 47.24
City Hudson	State OH Zip Code 44236-1115	
Purpose of Disbursement Payroll Fees	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9T2TJ0
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 21.27
City Eureka	State CA Zip Code 95503-3929	
Purpose of Disbursement Office Supplies	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9SVRQ0
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 150.14
City Eureka	State CA Zip Code 95503-3929	
Purpose of Disbursement Office Supplies	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9SVRR8
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	218.65
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 95 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 15.74
City Eureka	State CA	
Zip Code 95503-3929	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 50.36
City Eureka	State CA	
Zip Code 95503-3929	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 12.84
City Eureka	State CA	
Zip Code 95503-3929	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	78.94
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 96 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 237.50
City Eureka	State CA	
Zip Code 95503-3929		
Purpose of Disbursement Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" 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 04 / 29 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 65.27
City Eureka	State CA	
Zip Code 95503-3929		
Purpose of Disbursement Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" 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 05 / 24 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 111.21
City Eureka	State CA	
Zip Code 95503-3929		
Purpose of Disbursement Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	413.98
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 97 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 12.70
City Eureka	State CA	
Zip Code 95503-3929	Purpose of Disbursement Office Supplies	Transaction ID : VNTVH9T1QD5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" 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 06 / 27 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 11.63
City Eureka	State CA	
Zip Code 95503-3929	Purpose of Disbursement Printing	Transaction ID : VNTVH9T3076
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" 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 06 / 30 / 2016
Mailing Address 800 W Harris St		Amount of Each Disbursement this Period 67.56
City Eureka	State CA	
Zip Code 95503-3929	Purpose of Disbursement Office Supplies	Transaction ID : VNTVH9T4H87
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	91.89
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 98 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 13.46 <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	Transaction ID : VNTVH9SZ2H8
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 6.40 <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	Transaction ID : VNTVH9SZ2J6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 4.98 <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	Transaction ID : VNTVH9T0EX6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13.46
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 99 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Stripe		<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>06</td> <td></td> <td>02</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		02		2016
M M	/	D D	/	Y Y Y Y								
06		02		2016								
Mailing Address 3180 18th St		Amount of Each Disbursement this Period										
City	State											
San Francisco	CA	<table border="1"> <tr> <td>18.00</td> </tr> </table>	18.00									
18.00												
Purpose of Disbursement Merchant Fees	Zip Code 94110-2043	<input type="checkbox"/> Memo Item Transaction ID : VNTVH9T0EY4										
Candidate Name	Category/Type											
Office Sought:	Disbursement For: 2016											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Stripe		<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>06</td> <td></td> <td>06</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		06		2016
M M	/	D D	/	Y Y Y Y								
06		06		2016								
Mailing Address 3180 18th St		Amount of Each Disbursement this Period										
City	State											
San Francisco	CA	<table border="1"> <tr> <td>0.33</td> </tr> </table>	0.33									
0.33												
Purpose of Disbursement Merchant Fees	Zip Code 94110-2043	<input type="checkbox"/> Memo Item Transaction ID : VNTVH9T0E22										
Candidate Name	Category/Type											
Office Sought:	Disbursement For: 2016											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. Stripe		<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>06</td> <td></td> <td>07</td> <td></td> <td>2016</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		07		2016
M M	/	D D	/	Y Y Y Y								
06		07		2016								
Mailing Address 3180 18th St		Amount of Each Disbursement this Period										
City	State											
San Francisco	CA	<table border="1"> <tr> <td>16.55</td> </tr> </table>	16.55									
16.55												
Purpose of Disbursement Merchant Fees	Zip Code 94110-2043	<input type="checkbox"/> Memo Item Transaction ID : VNTVH9T0F00										
Candidate Name	Category/Type											
Office Sought:	Disbursement For: 2016											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>34.88</td> </tr> </table>	34.88
34.88		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 100 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Stripe		<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2016"/>
Mailing Address 3180 18th St		Amount of Each Disbursement this Period <input type="text" value="34.25"/>
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : VNTVH9T0F18
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Stripe		<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2016"/>
Mailing Address 3180 18th St		Amount of Each Disbursement this Period <input type="text" value="14.80"/>
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : VNTVH9T0F41
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Stripe		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2016"/>
Mailing Address 3180 18th St		Amount of Each Disbursement this Period <input type="text" value="7.55"/>
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : VNTVH9T0F59
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="56.60"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 101 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 3.20
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T1JB0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 7.55
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T1JC8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 7.55
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T1JD5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	18.30
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 102 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement MM / DD / YYYY 06 / 20 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 8.58
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T1JE3
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement MM / DD / YYYY 06 / 22 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 1.75
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T3594
State: District:		

Full Name (Last, First, Middle Initial) c. Stripe		Date of Disbursement MM / DD / YYYY 06 / 24 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 10.05
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : VNTVH9T35A2
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	20.38
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 103 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial)		Date of Disbursement															
A. Stripe		<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>06</td> <td></td> <td>27</td> <td></td> <td>2016</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		27		2016				
M M	/	D D	/	Y Y Y Y													
06		27		2016													
Mailing Address 3180 18th St		Amount of Each Disbursement this Period															
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2043</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2043	<table border="1"> <tr> <td>24.10</td> </tr> </table>		24.10							
City	State	Zip Code															
San Francisco	CA	94110-2043															
24.10																	
Purpose of Disbursement Merchant Fees		<input type="checkbox"/> Memo Item															
Candidate Name		Transaction ID : VNTVH9T35B9															
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016 <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input checked="" type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)		
<input type="checkbox"/>	House																
<input type="checkbox"/>	Senate																
<input type="checkbox"/>	President																
<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General														
<input type="checkbox"/>	Other (specify)																
State: District:																	

Full Name (Last, First, Middle Initial)		Date of Disbursement															
B. Stripe		<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>06</td> <td></td> <td>28</td> <td></td> <td>2016</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		28		2016				
M M	/	D D	/	Y Y Y Y													
06		28		2016													
Mailing Address 3180 18th St		Amount of Each Disbursement this Period															
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2043</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2043	<table border="1"> <tr> <td>14.80</td> </tr> </table>		14.80							
City	State	Zip Code															
San Francisco	CA	94110-2043															
14.80																	
Purpose of Disbursement Merchant Fees		<input type="checkbox"/> Memo Item															
Candidate Name		Transaction ID : VNTVH9T35C7															
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016 <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input checked="" type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)		
<input type="checkbox"/>	House																
<input type="checkbox"/>	Senate																
<input type="checkbox"/>	President																
<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General														
<input type="checkbox"/>	Other (specify)																
State: District:																	

Full Name (Last, First, Middle Initial)		Date of Disbursement															
C. Stripe		<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>06</td> <td></td> <td>29</td> <td></td> <td>2016</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		29		2016				
M M	/	D D	/	Y Y Y Y													
06		29		2016													
Mailing Address 3180 18th St		Amount of Each Disbursement this Period															
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2043</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2043	<table border="1"> <tr> <td>64.40</td> </tr> </table>		64.40							
City	State	Zip Code															
San Francisco	CA	94110-2043															
64.40																	
Purpose of Disbursement Merchant Fees		<input type="checkbox"/> Memo Item															
Candidate Name		Transaction ID : VNTVH9T35D5															
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016 <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input checked="" type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)		
<input type="checkbox"/>	House																
<input type="checkbox"/>	Senate																
<input type="checkbox"/>	President																
<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General														
<input type="checkbox"/>	Other (specify)																
State: District:																	

SUBTOTAL of Disbursements This Page (optional).....	103.30
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 104 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial)		Date of Disbursement															
A. Stripe		<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>06</td> <td></td> <td>30</td> <td></td> <td>2016</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		30		2016				
M M	/	D D	/	Y Y Y Y													
06		30		2016													
Mailing Address 3180 18th St		Amount of Each Disbursement this Period															
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2043</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2043	<table border="1"> <tr> <td>84.64</td> </tr> </table>		84.64							
City	State	Zip Code															
San Francisco	CA	94110-2043															
84.64																	
Purpose of Disbursement Merchant Fees		<input type="checkbox"/> Memo Item															
Candidate Name		Transaction ID : VNTVH9T35E3															
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016 <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input checked="" type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)		
<input type="checkbox"/>	House																
<input type="checkbox"/>	Senate																
<input type="checkbox"/>	President																
<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General														
<input type="checkbox"/>	Other (specify)																
State: District:																	

Full Name (Last, First, Middle Initial)		Date of Disbursement															
B. Stripe		<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>06</td> <td></td> <td>30</td> <td></td> <td>2016</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		30		2016				
M M	/	D D	/	Y Y Y Y													
06		30		2016													
Mailing Address 3180 18th St		Amount of Each Disbursement this Period															
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2043</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2043	<table border="1"> <tr> <td>24.41</td> </tr> </table>		24.41							
City	State	Zip Code															
San Francisco	CA	94110-2043															
24.41																	
Purpose of Disbursement Merchant Fees		<input type="checkbox"/> Memo Item															
Candidate Name		Transaction ID : VNTVH9T38A8															
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016 <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input checked="" type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)		
<input type="checkbox"/>	House																
<input type="checkbox"/>	Senate																
<input type="checkbox"/>	President																
<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General														
<input type="checkbox"/>	Other (specify)																
State: District:																	

Full Name (Last, First, Middle Initial)		Date of Disbursement															
C. Stripe		<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>06</td> <td></td> <td>30</td> <td></td> <td>2016</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		30		2016				
M M	/	D D	/	Y Y Y Y													
06		30		2016													
Mailing Address 3180 18th St		Amount of Each Disbursement this Period															
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94110-2043</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94110-2043	<table border="1"> <tr> <td>81.98</td> </tr> </table>		81.98							
City	State	Zip Code															
San Francisco	CA	94110-2043															
81.98																	
Purpose of Disbursement Merchant Fees		<input type="checkbox"/> Memo Item															
Candidate Name		Transaction ID : VNTVH9T38D2															
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>		<input type="checkbox"/>	House	<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: 2016 <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input checked="" type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)		
<input type="checkbox"/>	House																
<input type="checkbox"/>	Senate																
<input type="checkbox"/>	President																
<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General														
<input type="checkbox"/>	Other (specify)																
State: District:																	

SUBTOTAL of Disbursements This Page (optional).....	191.03
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 105 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2016
Mailing Address 3180 18th St		Amount of Each Disbursement this Period 13.71
City San Francisco	State CA	
Zip Code 94110-2043	Purpose of Disbursement Merchant Fees	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T7189
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Illuminating Company		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2016
Mailing Address PO Box 3638		Amount of Each Disbursement this Period 162.73
City Akron	State OH	
Zip Code 44309-3638	Purpose of Disbursement Utilities	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : VNTVH9T6ZX9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 475 Lenfant Plz SW		Amount of Each Disbursement this Period 43.00
City Washington	State DC	
Zip Code 20260-0004	Purpose of Disbursement PO Box Rental	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : VNTVH9SW682
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	219.44
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 106 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 141.00
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SW5F5
State: District:			

Full Name (Last, First, Middle Initial) B. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.45
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SX9E5
State: District:			

Full Name (Last, First, Middle Initial) C. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 128.00
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SY2E8
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	282.45
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 107 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20	
City Washington	State DC	Zip Code 20260-0004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : VNTVH9SXZV4	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20	
City Washington	State DC	Zip Code 20260-0004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : VNTVH9SXZX8	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) C. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20	
City Washington	State DC	Zip Code 20260-0004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : VNTVH9SXZY6	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	39.60
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 108 OF 115			
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SXZZ4
State: District:			

Full Name (Last, First, Middle Initial) B. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SY002
State: District:			

Full Name (Last, First, Middle Initial) C. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SY019
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	39.60
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 109 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20	
City Washington	State DC	Zip Code 20260-0004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type		
Candidate Name		Transaction ID : VNTVH9SY027		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 47.00	
City Washington	State DC	Zip Code 20260-0004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type		
Candidate Name		Transaction ID : VNTVH9SYVC5		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 47.00	
City Washington	State DC	Zip Code 20260-0004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type		
Candidate Name		Transaction ID : VNTVH9SZZZ1		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	107.20
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 110 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20	
City Washington	State DC	Zip Code 20260-0004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : VNTVH9T0009	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) B. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20	
City Washington	State DC	Zip Code 20260-0004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : VNTVH9T0017	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) C. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20	
City Washington	State DC	Zip Code 20260-0004	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : VNTVH9T0025	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	39.60
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 111 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 13.20
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9T00M7
State: District:			

Full Name (Last, First, Middle Initial) B. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 188.00
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9T0169
State: District:			

Full Name (Last, First, Middle Initial) C. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 14.10
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9T00K9
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	215.30
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 112 OF 115			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 20				

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 47.00
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9T0E31
State: District:			

Full Name (Last, First, Middle Initial) B. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 9.00
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9T1460
State: District:			

Full Name (Last, First, Middle Initial) C. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2016
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 141.00
City Washington	State DC	Zip Code 20260-0004	
Purpose of Disbursement Postage		Category/ Type	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9T1GM5
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	197.00
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 113 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. US Postal Service		Date of Disbursement MM / DD / YYYY 06 / 15 / 2016
Mailing Address 2711 W Market St		Amount of Each Disbursement this Period 705.00
City Fairlawn	State OH Zip Code 44333-4205	
Purpose of Disbursement Postage	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9T15C0
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Velocity Direct		Date of Disbursement MM / DD / YYYY 05 / 17 / 2016
Mailing Address 6410 Eastland Rd Ste G		Amount of Each Disbursement this Period 657.05
City Cleveland	State OH Zip Code 44142-1306	
Purpose of Disbursement Printing	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9SY043
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Michael Wager		Date of Disbursement MM / DD / YYYY 05 / 04 / 2016
Mailing Address 40 Ridgecreek Trl		Amount of Each Disbursement this Period 423.00
City Moreland Hills	State OH Zip Code 44022-2379	
Purpose of Disbursement Reimbursed Items - See Details	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : VNTVH9SX9N0
State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1785.00
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 114 OF 115	
	<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)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016	
Mailing Address 475 Lenfant Plz SW			Amount of Each Disbursement this Period 338.00	
City Washington	State DC	Zip Code 20260-0004	Category/ Type	
Purpose of Disbursement Postage				
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : VNTVH9SX9Q6 *	
State: District:				

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	Category/ Type	
Purpose of Disbursement				
Candidate Name			<input type="checkbox"/> Memo Item	
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.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	Category/ Type	
Purpose of Disbursement				
Candidate Name			<input type="checkbox"/> Memo Item	
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).....	0.00
TOTAL This Period (last page this line number only).....	37105.85

**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 115 OF 115	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Citizens for Michael Wager

Full Name (Last, First, Middle Initial) A. Ashtabula County Democratic Executive Committee		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2016
Mailing Address 478 Benjamin St		Amount of Each Disbursement this Period 200.00
City Conneaut State OH Zip Code 44030-1202	Purpose of Disbursement Contribution	<input type="checkbox"/> Memo Item
Candidate Name Ashtabula County Democratic Executive Committee	Category/Type	Transaction ID : VNTVH9T02D5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Summit County Progressive Democrats PAC		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016
Mailing Address PO Box 477		Amount of Each Disbursement this Period 300.00
City Bath State OH Zip Code 44210-0477	Purpose of Disbursement Contribution	<input type="checkbox"/> Memo Item
Candidate Name Summit County Progressive Democrats PAC	Category/Type	Transaction ID : VNTVH9SVRN4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
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 Contribution	<input type="checkbox"/> 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).....	500.00
TOTAL This Period (last page this line number only).....	500.00