Only

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FEC FORM 1			RGAN		OF ON				Office	Use Or	nly		•
1. NAME OF COMMITTEE (ir	n full)		Check if nams changed)		mple:If typing r the lines.	ı, type	12F1	Ξ4M5			,		
Lape for Ol	nio		1 1 1 1 1					1 1 1	1 1				
ADDRESS (number a	nd street)	18150 M	oniger Rd										
(Check if a is changed													
is changed	<i>1)</i>	Danville CI	TY 🛦				OH STATE	J L	43014	ZI	_ -  P CC	DDE 🛦	
COMMITTEE'S E-MA	AIL ADDRE	ESS											
(Check if a is changed		lapefor	ohio@gmai	l.com									
		Optional   <b>lapeto</b>	Second E-Ma wnhall@g	ail Address mail.com		1 1 1 1		1 1 1	1 1	1 1	1 1		I
★ (Check if a is changed)  ★ (Check if a is		https://lap	peforohio.com/										
2. DATE 0		2 / Y	2021										
3. FEC IDENTIFIC	CATION N	UMBER ▶		C0073444	12								
4. IS THIS STATEM	MENT	NEW	(N) O	R ×	AMEND	ED (A)							
certify that I have e	examined t	his Stateme	ent and to the	best of my	knowledge an	d belief it	is true,	correct a	and co	mplete	).		
Type or Print Name	of Treasure	er Lape, Li	sa, , ,										
Signature of Treasure	er <i>Lape</i>	e, Lisa, , ,			[Electronically	Filed]	Date	M M 06	/ [	02	/ Y	202	
NOTE: Submission of	false, error				oject the perso				he per	alties	of 2 L	J.S.C.	§437g.
Office Use					For further int Federal Electio Toll Free 800-4	n Commissio				EC F			

Toll Free 800-424-9530

Local 202-694-1100

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TYPE OF COMMITTEE  Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Com	plete the candidate
information below.)  Name of LAPE, BRANDON, MICHAEL, ,  Candidate LIPE, LAPE, BRANDON, MICHAEL, ,	
Candidate Party Affiliation  REP  Office Sought:  House  Senate  President	State OH District 07
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
	(Democratic, Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Committees Participating in Joint Fundraiser	
1. FEC ID number	
2. FEC ID number	
3.	
4.	

	FEC Form 1 (Rev		Page <b>3</b>
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE  Mailing Address  CITY STATE ZIP CODE  Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Full Name 1919 Moniger Rd 1919 Monige			
Mailing Address  CITY STATE ZIP CODE  Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committ books and records.  Lape, Lisa, , ,  Full Name   Lape, Lisa, , ,    Title or Position   CITY   STATE   ZIP CODE    Treasurer   Telephone number   740   501   6062    Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name   Lape, Lisa, . ,    Full Name   Lape, Lisa, . ,    Danville   Danville   DH   43014    Lape, Lisa, . ,    Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name   Lape, Lisa, . ,    Danville   Danville   DH   43014    CITY   STATE   ZIP CODE    Title or Position   CITY   STATE   ZIP CODE    Title or Position   CITY   STATE   ZIP CODE    Title or Position   DH   43014    CITY   STATE   ZIP CODE    Title or Position   CITY   STATE	Lape for Ohio	0	
Mailing Address  CITY STATE ZIP CODE  Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committed books and records.  Lape, Lisa. , .  Full Name    Danville   OH   43014   OH   43014     Title or Position   CITY   STATE   ZIP CODE    Treasurer   Telephone number   740   501   6062     Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name   Lape, Lisa. , ,	. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
CITY STATE ZIP CODE  Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records.  Full Name Jaliso Moniger Rd  Danville OH 43014  Title or Position CITY STATE ZIP CODE  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name Lape, Lisa,  Full Name Lape, Lisa,  Full Name Lape, Lisa,  CITY STATE ZIP CODE  Title or Position  CITY STATE ZIP CODE	NONE		
CITY STATE ZIP CODE  Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records.  Full Name Jaliso Moniger Rd  Danville OH 43014  Title or Position CITY STATE ZIP CODE  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name Lape, Lisa,  Full Name Lape, Lisa,  Full Name Lape, Lisa,  CITY STATE ZIP CODE  Title or Position  CITY STATE ZIP CODE			
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Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons  Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.  Full Name Lape, Lisa, , ,  Full Name Mailing Address  Title or Position  CITY STATE ZIP CODE  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Mailing Address  Affiliated Committee Joint Fundraising Representative Lape, Lisa, , ,  OH 43014  Lape, Lisa, , ,  Danville Lape, Lisa, , ,  OH 43014  CITY STATE ZIP CODE  Title or Position			
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committed books and records.  Full Name  Lape, Lisa, , ,  Full Name  Danville  Danville  Danville  Title or Position  CITY  STATE  ZIP CODE  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Lape, Lisa, , ,  GITY  STATE  CITY  STATE  ZIP CODE  Title or Position		CITY STATE	ZIP CODE
Title or Position  CITY  STATE  ZIP CODE  Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name of Treasurer  Mailing Address    Danville		s: Identify by name, address (phone number optional) and position of the person	n in possession of committe
Mailing Address    18150 Moniger Rd	Lape	e, Lisa, , ,	
Title or Position  CITY  STATE  ZIP CODE  Treasurer  Telephone number  Telephone num	Full Name	19150 Manigar Pd	
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name	Mailing Address		
Title or Position  CITY  STATE  ZIP CODE  Treasurer  Telephone number  Telephone num			
Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).  Full Name		Danville OH 4	3014 
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any designated agent (e.g., assistant treasurer).  Full Name	Treasurer	Telephone number 740	_ 501 _ 6062
of Treasurer  Mailing Address    18150 Moniger Rd	Treasurer: List the name any designated agent (	ne and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	the name and address of
Danville  CITY  STATE  ZIP CODE  Title or Position		e, Lisa, , ,	
CITY STATE ZIP CODE  Title or Position	Mailing Address	18150 Moniger Rd	
CITY STATE ZIP CODE  Title or Position			
Title or Position			

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Full Name of Designated Agent	1	
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
		s accounts ronts
		c accounts routs
Banks or Other safety deposit be	or <b>Depositories</b> : List all banks or other depositories in which the committee deposits funds, hold poxes or maintains funds.	s accounts, rents
Banks or Other safety deposit be Name of Bank,	poxes or maintains funds.	s accounts, rents
safety deposit be	poxes or maintains funds.	s accounts, terms
safety deposit be	Depository, etc.  Park National Bank  1 S Main St	s accounts, rents
safety deposit be Name of Bank,	Depository, etc.  Park National Bank  1 S Main St	s accounts, rents
safety deposit be Name of Bank,	Depository, etc.  Park National Bank  1 S Main St	
safety deposit be Name of Bank,	Depository, etc.  Park National Bank  1 S Main St	ZIP CODE
safety deposit be Name of Bank,	Depository, etc.  Park National Bank  1 S Main St  Mount Vernon  CITY  STATE	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Park National Bank  1 S Main St  Mount Vernon  CITY  STATE  Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Park National Bank  1 S Main St  Mount Vernon  CITY  STATE	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Park National Bank  S Main St  Mount Vernon  CITY  STATE  Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Park National Bank  S Main St  Mount Vernon  CITY  STATE  Depository, etc.	ZIP CODE
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Park National Bank  S Main St  Mount Vernon  CITY  STATE  Depository, etc.	ZIP CODE