| FEC FORM 1 | STATEMENT OF ORGANIZATION | PAGE 1 / 4 |
|--|--|----------------------------------|
| 1. NAME OF COMMITTEE (in fu | II) (Check if name Example: If typing, type over the lines. | 12FE4M5 |
| | | |
| | | |
| ADDRESS (number and a | | |
| is changed) | Woodsfield CITY ▲ | OH 43793 STATE ▲ ZIP CODE ▲ |
| COMMITTEE'S E-MAIL | ADDRESS | |
| (Check if add is changed) | ress aroundtheblock@gmn4u.com | |
| | Optional Second E-Mail Address ablock233@gmail.com | |
| COMMITTEE'S WEB P4 (Check if add is changed) | | |
| 2. DATE 05 | / D D / Y Y Y Y 25 2016 | |
| 3. FEC IDENTIFICAT | C C00618413 | |
| 4. IS THIS STATEME | NT X NEW (N) OR AMENDED (A) | |
| I certify that I have example | mined this Statement and to the best of my knowledge and belief it | t is true, correct and complete. |
| Type or Print Name of T | Treasurer Mrs Ann Louise Block | |
| Signature of Treasurer | Mrs Ann Louise Block [Electronically Filed] | Date 05 / 05 / 2016 |
| NOTE: Submission of fals | e, erroneous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED V | |
| Office Use Only | For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100 | |

| - | | |
|----------------------------|---|---------------------------------|
| FEC F | form 1 (Revised 02/2009) | Page 2 |
| TYPE OF | COMMITTEE | |
| Candidat | te 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. (Complete t information below.) | he candidate |
| Name of Candidate | | |
| Candidate Party Affilia | ation Sought: House Senate President | tate |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name of Candidate | | |
| Party Co | mmittee: | |
| (d) | This committee is a (National, State or subordinate) committee of the (Demo Repub | ocratic, Ilican, etc.) Party |
| Political / | Action Committee (PAC): | |
| (e) | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected | d organization is |
| | Corporation Corporation w/o Capital Stock | or Organization |
| | Membership Organization Trade Association Coo | perative |
| | In addition, this committee is a Lobbyist/Registrant PAC. | |
| (f) | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat committee. (i.e., nonconnected committee) | ted 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 Fun | draising Representative: | |
| (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or n committees/organizations, at least one of which is an authorized committee of a federal candidate. | nore political |
| (h) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, none of which is an authorized committee of a federal candidate. | ore political |
| Cor | mmittees Participating in Joint Fundraiser | |
| 1. | FEC ID number | |
| 2. | FEC ID number | |
| 3. | FEC ID number | |
| 4. | FEC ID number | |

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Write or Type Committee Name

OHIO WOMEN'S CAUCUS

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6.

| NONE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------|-------------|-------------|-------|------|----|-------|----|----|----|------|---|---|-----|------|----|------|------|----|---|-----|---|-------|----|---|----|----|------|----------|----|-----|-----|------|
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Add | dress | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | CI | ΓY | | | | | | | | | _ | | S | TAT | Ē | | | _ | | ZI | IP (| _ COI | DE | | | |
| Relationshi | p: Connecte | ∟ ed Orç | janiz | atio | on | Affil | | | nm | itte | e | | Joi | nt F | un | ndra | aisi | ng | | | | tativ | /e | | Le | | | | | C S | por | ISOr |

| Mrs Ann L | Louise Block |
|-------------------|-------------------------------|
| Full Name | |
| Mailing Address | 36501 County Rd 2 East |
| | |
| | Woodsfield OH 43793 |
| Title or Position | CITY STATE ZIP CODE |
| Treasurer | Telephone number 740 391 6119 |

8. 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 | Mrs Ann Louise Block |
|--------------------------------|-------------------------------|
| of Treasurer | |
| Mailing Address | 36501 County Rd 2 East |
| | |
| | Woodsfield |
| | CITY STATE ZIP CODE |
| Title or Position Treasurer | Telephone number 740 391 6119 |

FEC Form 1 (Revised 02/2009)

| Full Name of Designated Agent | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------|--|--|--|---|---|---|-----|---|---|--|--|----------------|-----|-----|------|-----|-----|--|--|--|--|---|---|--|--|---|--|--|
| Mailing Address | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | |
| | | | | 1 | 1 | 1 | | 1 | 1 | | | | | 1 | | | | | | | | 1 | 1 | | | I | | |
| | | | | | | (| CIT | Y | | | | STATE ZIP CODE | | | | | | | | | | | | | | | | |
| Title or Position | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | Tele | eph | one | e ni | umt | ber | | | | | | | | | | | |

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

| V | VesBanco Bank Inc | | |
|-------------------|-----------------------|-------|----------|
| Mailing Address | Woodsfield Office | | |
| | 101 North Sycamore St | | |
| | Woodsfield | OH 4 | 3793 |
| | CITY | STATE | ZIP CODE |
| Name of Bank, Dep | pository, etc. | | |
| L | | |] |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY | STATE | ZIP CODE |