



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Cincinnatus PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>	<input type="text" value="15815.60"/>	<input type="text" value="15815.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9978.08"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="96400.00"/>	<input type="text" value="139750.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="106378.08"/>	<input type="text" value="155565.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="59804.69"/>	<input type="text" value="108992.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="46573.39"/>	<input type="text" value="46573.39"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Cincinnatus PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2017

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	71250.00	111750.00
(ii) Unitemized .....	450.00	900.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	71700.00	112650.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	24700.00	27100.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	96400.00	139750.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	96400.00	139750.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	96400.00	139750.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	35304.69	75642.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	35304.69	75642.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	250.00	1250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1000.00
29. Other Disbursements (Including Non-Federal Donations).....	24250.00	31100.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	59804.69	108992.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59804.69	108992.21

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	96400.00	139750.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	96400.00	138750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	35304.69	75642.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	35304.69	75642.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Cincinnatus PAC**

**A. Beck, Louis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8534 E Kemper Rd  
 City Cincinnati State OH Zip Code 45249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Janus Properties Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 10 / 2017**  
**Transaction ID : SA11AI.5062**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Bortz, Neil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1055 Paul St  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Towne Properties Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 03 / 2017**  
**Transaction ID : SA11AI.5091**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Butler, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 75020  
 City Cincinnati State OH Zip Code 45275  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cincinnati Barge & Rail Termin Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 30 / 2017**  
**Transaction ID : SA11AI.5090**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Cassady, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1144 Edwards Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) USI, Inc. Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : SA11AI.5100**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Castellini, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2180 Grandin Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RHC Holdings, Inc. Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 28 / 2017  
**Transaction ID : SA11AI.5093**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Castellini, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2180 Grandin Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 28 / 2017  
**Transaction ID : SA11AI.5095**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 64
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Cleves, Joe, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2017
Mailing Address 2458 Kremers Lane		<b>Transaction ID : SA11AI.5117</b>
City Villa Hills	State KY	Zip Code 41017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Taft Stettinius & Hollister LL	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Coletti, Robert, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 04 / 2017
Mailing Address 4885 Drake Rd		<b>Transaction ID : SA11AI.5084</b>
City Cincinnati	State OH	Zip Code 45243
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2200.00
Name of Employer (for Individual) KMK Law	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Coletti, Robert, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2017
Mailing Address 4885 Drake Rd		<b>Transaction ID : SA11AI.5097</b>
City Cincinnati	State OH	Zip Code 45243
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer (for Individual) KMK Law	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 3700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Daoud, Sami, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17080 St Rt 247  
 City Seaman State OH Zip Code 45679  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 DIFR LLC CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 27 / 2017  
**Transaction ID : SA11AI.5080**  
 Amount of Each Receipt this Period  
 1100.00  
 Memo Item

**B. Diller, Ed, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 Thomas Pointe Dr  
 City Ft Thomas State KY Zip Code 41075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Taft Stettinius & Hollister LL Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : SA11AI.5123**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Glover, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7910 Loneoak Dr  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Focused Capital Solutions Member  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017  
**Transaction ID : SA11AI.5098**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 64
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Hayden, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3601 Observatory Ave  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Taft Stettinius & Hollister LL Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 29 / 2017**  
**Transaction ID : SA11AI.5115**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Heckler, Alex, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4555 N Bay Rd  
 City Miami Beach State FL Zip Code 33140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LSN Partners Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 28 / 2017**  
**Transaction ID : SA11AI.5082**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Heidt, Chip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 Grandview Dr #400  
 City Ft. Mitchell State KY Zip Code 41017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wellington Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 19 / 2017**  
**Transaction ID : SA11AI.5077**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Heidt, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 W. Liberty Street  
 City Reno State NV Zip Code 89501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wellington Orthopedic Occupation (for Individual) Chief of Medicine  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 19 / 2017  
**Transaction ID : SA11AI.5079**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Heidt, Rob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 W. Liberty Street  
 City Reno State NV Zip Code 89501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Unemployed Occupation (for Individual) Unemployed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2017  
**Transaction ID : SA11AI.5064**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Herche, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2613 Handasyde Ave  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Enerfab, Inc. Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 01 / 2017  
**Transaction ID : SA11AI.5075**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Joseph, Marcia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1116 Leafree Ct  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Unemployed Occupation (for Individual) Unemployed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 08 / 03 / 2017  
**Transaction ID : SA11AI.5070**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Joseph, Ronald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 E 5th St, #285  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Joseph Toyota Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3100.00

Date of Receipt 08 / 02 / 2017  
**Transaction ID : SA11AI.5069**  
 Amount of Each Receipt this Period 900.00  
 Memo Item

**C. Joseph, Ronald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 E 5th St, #285  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Joseph Toyota Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5100.00

Date of Receipt 10 / 26 / 2017  
**Transaction ID : SA11AI.5089**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 64
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Mahjan, Anjali, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1404 E McMilan #7  
 City Cincinnati State OH Zip Code 45206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Trihealth Occupation (for Individual) Doctor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 14 / 2017  
**Transaction ID : SA11AI.5071**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

**B. Neyer, Dan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3018 Golden Ave  
 City Cincinnati State OH Zip Code 45226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Neyer Properties Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 08 / 02 / 2017  
**Transaction ID : SA11AI.5068**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item

**C. Power, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6650 Alberly Lane  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Carew Ralty, LLC Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 04 / 2017  
**Transaction ID : SA11AI.5086**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 64
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Ritter, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2324 Madison Road #209  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Taft Stettinius & Hollister LL Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 29 / 2017  
**Transaction ID : SA11AI.5119**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Ruh, Dan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 154 Park Rd  
 City Ft Wright State KY Zip Code 41011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Al Neyer, Inc. Occupation (for Individual) COO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : SA11AI.5102**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. Thursby, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2613 Handyasyde Ave  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Unemployed Occupation (for Individual) N/A  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 01 / 2017  
**Transaction ID : SA11AI.5076**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 64
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Weiland, Dick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2444 Madison Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2017  
**Transaction ID : SA11AI.5088**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**B. Weiland, Dick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2444 Madison Rd  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) N/A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2017  
**Transaction ID : SA11AI.5104**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Zimmerman, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7655 Brill Rd  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Taft Stettinius & Hollister LL Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2017  
**Transaction ID : SA11AI.5121**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	71250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. ACT Ohio PCE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 222 E Town St  
City Columbus State OH Zip Code 43215  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : SA11C.5136**  
Amount of Each Receipt this Period 2500.00  
 Memo Item  
Contribution from Ohio PCE (political contributing entity)

**B. BACPAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 700 Walnut St #450  
City Cincinnati State OH Zip Code 45202  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 18 / 2017  
**Transaction ID : SA11C.5151**  
Amount of Each Receipt this Period 2000.00  
 Memo Item  
Contribution from an Ohio PAC

**C. Cincinnati Firefighters Local 48 PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1011 W 8th St  
City Cincinnati State OH Zip Code 45203  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 12 / 20 / 2017  
**Transaction ID : SA11C.5142**  
Amount of Each Receipt this Period 1500.00  
 Memo Item  
contribution from an Ohio PAC

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. CINCINNATI SHEET METAL WORKERS PAC FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1579 Summit Road

City Cincinnati	State OH	Zip Code 45237
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2017

**Transaction ID : SA11C.5127**

Amount of Each Receipt this Period  
300.00

Memo Item  
Ohio PAC (OH994)

**B. CODE PCE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 W Pete Rose Way

City Cincinnati	State OH	Zip Code 45203
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

**Transaction ID : SA11C.5143**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Contribution from an Ohio PCE

**C. Committee to Elect Fred Strahorn**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 531 Belmonte Park

City Dayton	State OH	Zip Code 45406
----------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	02	/	2017

**Transaction ID : SA11C.5125**

Amount of Each Receipt this Period  
1400.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Dinsmore & Shohl LLP PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 E Fifth St #1900

City Cincinnati	State OH	Zip Code 45202
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2017

**Transaction ID : SA11C.5148**

Amount of Each Receipt this Period  
500.00

Memo Item  
Contribution from an Ohio PAC

**B. GRAYDON GOOD GOVERNMENT COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 553 LASSING WAY

City WALTON	State KY	Zip Code 41094
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00610295

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2017

**Transaction ID : SA11C.5140**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C. HUNTINGTON BANCSHARES INC. POLITICAL ACTION COMMITTEE (HBI-PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 S. HIGH STREET

City COLUMBUS	State OH	Zip Code 43287
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00165589

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2017

**Transaction ID : SA11C.5133**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 64
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Laborers Local 265 PCE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3457 Montgomery Rd  
 City Cincinnati State OH Zip Code 45207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 21 / 2017  
**Transaction ID : SA11C.5145**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Contribution from an Ohio PCE

**B. UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1775 K STREET, NW  
 City WASHINGTON State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C** C00002766  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 12 / 2017  
**Transaction ID : SA11C.5131**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	24700.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. FC Cincinnati**

Mailing Address 14 E. 4th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event tickets

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5158  
Amount of Each Disbursement this Period  
86.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. First Watch**

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5157  
Amount of Each Disbursement this Period  
30.64

Memo Item

Full Name (Last, First, Middle Initial)

**C. First Watch**

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5177  
Amount of Each Disbursement this Period  
31.71

Memo Item

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

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

148.35

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. First Watch**

Full Name (Last, First, Middle Initial)

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5264

Amount of Each Disbursement this Period: 32.71

Memo Item

**B. First Watch**

Full Name (Last, First, Middle Initial)

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5294

Amount of Each Disbursement this Period: 30.46

Memo Item

**C. First Watch**

Full Name (Last, First, Middle Initial)

Mailing Address 700 Walnut Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5388

Amount of Each Disbursement this Period: 32.49

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 95.66

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5168</b> Amount of Each Disbursement this Period [ ] 41.24	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5179</b> Amount of Each Disbursement this Period [ ] 124.79	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5213</b> Amount of Each Disbursement this Period [ ] 49.73	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 215.76
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5219</b> Amount of Each Disbursement this Period [ ] 41.24	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5228</b> Amount of Each Disbursement this Period [ ] 38.10	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5276</b> Amount of Each Disbursement this Period [ ] 70.78	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 150.12
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5300</b> Amount of Each Disbursement this Period [ ] 41.24	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
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) ▼		<input type="checkbox"/> Memo Item
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>B. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5329</b> Amount of Each Disbursement this Period [ ] 92.22	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
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) ▼		<input type="checkbox"/> Memo Item
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>C. Incline Public House</b>		Date of Disbursement MM / DD / YYYY 12 / 29 / 2017	
Mailing Address 2601 W. 8th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5398</b> Amount of Each Disbursement this Period [ ] 45.52	
City Cincinnati	State OH	Zip Code 45206	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
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) ▼		<input type="checkbox"/> Memo Item
State: [ ]	District: [ ]		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 178.98
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. J. Alexanders</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2017	
Mailing Address 2969 Edmonson Rd			
City Cincinnati	State OH	Zip Code 45209	
Purpose of Disbursement Stakeholder meeting		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:		Transaction ID : <b>SB21B.5212</b> Amount of Each Disbursement this Period 43.33	
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. Manley Burke LPA</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2017	
Mailing Address 225 W Court St			
City Cincinnati	State OH	Zip Code 45202	
Purpose of Disbursement legal fees		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:		Transaction ID : <b>SB21B.5163</b> Amount of Each Disbursement this Period 730.80	
<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. Manley Burke LPA</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2017	
Mailing Address 225 W Court St			
City Cincinnati	State OH	Zip Code 45202	
Purpose of Disbursement Legal fees		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number <b>C</b>	
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:		Transaction ID : <b>SB21B.5183</b> Amount of Each Disbursement this Period 700.00	
<input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1474.13
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnati PAC**

Full Name (Last, First, Middle Initial) <b>A. Manley Burke LPA</b>			Date of Disbursement MM / DD / YYYY 09 / 13 / 2017		
Mailing Address 225 W Court St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5229</b> Amount of Each Disbursement this Period [ ] 700.00		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Legal fees		Candidate Name			
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) ▼		Memo Item <input type="checkbox"/>		
State: District:					
Full Name (Last, First, Middle Initial) <b>B. Manley Burke LPA</b>			Date of Disbursement MM / DD / YYYY 10 / 11 / 2017		
Mailing Address 225 W Court St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5281</b> Amount of Each Disbursement this Period [ ] 700.00		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Legal Fees		Candidate Name			
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) ▼		Memo Item <input type="checkbox"/>		
State: District:					
Full Name (Last, First, Middle Initial) <b>C. Manley Burke LPA</b>			Date of Disbursement MM / DD / YYYY 11 / 08 / 2017		
Mailing Address 225 W Court St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5343</b> Amount of Each Disbursement this Period [ ] 700.00		
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]		
Purpose of Disbursement Legal fees		Candidate Name			
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) ▼		Memo Item <input type="checkbox"/>		
State: District:					
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[ ] 2100.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			[ ]		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Manley Burke LPA**

Full Name (Last, First, Middle Initial)

Mailing Address 225 W Court St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Legal fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
12 / 07 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5373**

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. McCormick and Schmick's**

Full Name (Last, First, Middle Initial)

Mailing Address 21 E. 5th Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
07 / 19 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5164**

Amount of Each Disbursement this Period: 41.88

Memo Item

**C. Rivertown Strategies, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
07 / 01 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5153**

Amount of Each Disbursement this Period: 185.65

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 727.53

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)  
**A. Rivertown Strategies, LLC**

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event supplies reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 01 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5154**

Amount of Each Disbursement this Period: 1500.00

Memo Item

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

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Strategic consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 12 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5161**

Amount of Each Disbursement this Period: 831.63

Memo Item

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

Mailing Address 224 E 8th St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
Event supplies reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 12 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5162**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3331.63

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 26 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5169</b> Amount of Each Disbursement this Period [ ] 687.37	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Event supplies reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5170</b> Amount of Each Disbursement this Period [ ] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5180</b> Amount of Each Disbursement this Period [ ] 1583.73	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3771.10
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5190</b> Amount of Each Disbursement this Period [ ] 445.13	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Mileage reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5217</b> Amount of Each Disbursement this Period [ ] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5218</b> Amount of Each Disbursement this Period [ ] 993.70	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Event supplies reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2938.83
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 20 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5235</b> Amount of Each Disbursement this Period [REDACTED] 1355.11	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Event supplies reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5267</b> Amount of Each Disbursement this Period [REDACTED] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Strategic consulting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5268</b> Amount of Each Disbursement this Period [REDACTED] 458.26	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Event supplies and ticket reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3313.37
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5298</b> Amount of Each Disbursement this Period [ ] 1892.36	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Supplies and event ticket reimbursement		Candidate Name	
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) ▼		<input type="checkbox"/> Memo Item
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5320</b> Amount of Each Disbursement this Period [ ] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Strategic consulting		Candidate Name	
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) ▼		<input type="checkbox"/> Memo Item
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5321</b> Amount of Each Disbursement this Period [ ] 791.54	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Event supplies reimbursement		Candidate Name	
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) ▼		<input type="checkbox"/> Memo Item
State: [ ]	District: [ ]		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4183.90
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5336</b> Amount of Each Disbursement this Period [REDACTED] 400.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Rent payment reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 20 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5355</b> Amount of Each Disbursement this Period [REDACTED] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Strategic consulting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rivertown Strategies, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 20 / 2017	
Mailing Address 224 E 8th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5357</b> Amount of Each Disbursement this Period [REDACTED] 1741.18	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [REDACTED]
Purpose of Disbursement Event tickets and event supplies reimbursement		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3641.18
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Rivertown Strategies, LLC</b>			Date of Disbursement MM / DD / YYYY 12 / 11 / 2017	
Mailing Address 224 E 8th St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5378</b> Amount of Each Disbursement this Period [ ] 1500.00	
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]	
Purpose of Disbursement Strategic consulting		Candidate Name		
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:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. Rivertown Strategies, LLC</b>			Date of Disbursement MM / DD / YYYY 12 / 11 / 2017	
Mailing Address 224 E 8th St			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5379</b> Amount of Each Disbursement this Period [ ] 2107.50	
City Cincinnati	State OH	Zip Code 45202	Category/Type [ ]	
Purpose of Disbursement Legal fees		Candidate Name		
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:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. Sleepy Bee</b>			Date of Disbursement MM / DD / YYYY 07 / 24 / 2017	
Mailing Address 3098 Madison Road			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5166</b> Amount of Each Disbursement this Period [ ] 17.11	
City Cincinnati	State OH	Zip Code 45209	Category/Type [ ]	
Purpose of Disbursement Stakeholder meeting		Candidate Name		
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:	<input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3624.61
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5184**  
Amount of Each Disbursement this Period  
26.61

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5193**  
Amount of Each Disbursement this Period  
48.66

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.5349**  
Amount of Each Disbursement this Period  
34.62

Memo Item

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

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

109.89

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Sleepy Bee**

Mailing Address 3098 Madison Road

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 17 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5352  
Amount of Each Disbursement this Period  
41.25

Memo Item

Full Name (Last, First, Middle Initial)

**B. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5182  
Amount of Each Disbursement this Period  
172.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5223  
Amount of Each Disbursement this Period  
39.10

Memo Item

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

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

253.23

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)  
**A. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 09 / 18 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5233**

Amount of Each Disbursement this Period: 33.97

Memo Item

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

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 10 / 23 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5301**

Amount of Each Disbursement this Period: 37.83

Memo Item

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

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 10 / 27 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5306**

Amount of Each Disbursement this Period: 40.70

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 112.50

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnati PAC**

Full Name (Last, First, Middle Initial)

**A. Taste of Belgium**

Mailing Address 1135 Vine Street

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 11 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5375  
Amount of Each Disbursement this Period  
40.97

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Abercrombie Group**

Mailing Address 10301 Giverny Blvd

City Cincinnati State OH Zip Code 45241

Purpose of Disbursement Event ticket

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5341  
Amount of Each Disbursement this Period  
450.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 10 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5159  
Amount of Each Disbursement this Period  
13.66

Memo Item

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

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

504.63

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 07 / 10 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5160</b> Amount of Each Disbursement this Period [REDACTED] 14.16	
City San Francisco	State CA	Zip Code 94105	Category/ Type [REDACTED]
Purpose of Disbursement Travel costs		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5165</b> Amount of Each Disbursement this Period [REDACTED] 12.77	
City San Francisco	State CA	Zip Code 94105	Category/ Type [REDACTED]
Purpose of Disbursement Travel costs		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5167</b> Amount of Each Disbursement this Period [REDACTED] 22.06	
City San Francisco	State CA	Zip Code 94105	Category/ Type [REDACTED]
Purpose of Disbursement Travel costs		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 48.99
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

### A. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5173  
Amount of Each Disbursement this Period  
22.49

Memo Item

Full Name (Last, First, Middle Initial)

### B. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5176  
Amount of Each Disbursement this Period  
16.98

Memo Item

Full Name (Last, First, Middle Initial)

### C. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5185  
Amount of Each Disbursement this Period  
6.30

Memo Item

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

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

45.77





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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5207</b> Amount of Each Disbursement this Period [ ] 22.40	
City San Francisco	State CA	Zip Code 94105	Category/ Type [ ]
Purpose of Disbursement Travel costs		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5224</b> Amount of Each Disbursement this Period [ ] 2.00	
City San Francisco	State CA	Zip Code 94105	Category/ Type [ ]
Purpose of Disbursement Travel Costs		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5225</b> Amount of Each Disbursement this Period [ ] 4.00	
City San Francisco	State CA	Zip Code 94105	Category/ Type [ ]
Purpose of Disbursement Travel costs		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 28.40
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5231

Amount of Each Disbursement this Period: 4.00

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5232

Amount of Each Disbursement this Period: 15.48

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5260

Amount of Each Disbursement this Period: 3.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 22.48

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5261

Amount of Each Disbursement this Period: 6.30

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5262

Amount of Each Disbursement this Period: 6.54

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5263

Amount of Each Disbursement this Period: 30.24

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 43.08

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5286

Amount of Each Disbursement this Period: 11.15

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5287

Amount of Each Disbursement this Period: 24.30

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5291

Amount of Each Disbursement this Period: 77.21

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 112.66

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y 10 / 17 / 2017	
Mailing Address 182 Howard St, #8			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5295</b> Amount of Each Disbursement this Period [ ] 32.99	
City San Francisco	State CA	Zip Code 94105	Category/Type [ ]	
Purpose of Disbursement Travel costs			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [ ] 32.99	
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) ▼		Memo Item <input type="checkbox"/>	
State: District:			Amount of Each Disbursement this Period [ ] 32.99	
Full Name (Last, First, Middle Initial) <b>B. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y 10 / 20 / 2017	
Mailing Address 182 Howard St, #8			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5299</b> Amount of Each Disbursement this Period [ ] 2.00	
City San Francisco	State CA	Zip Code 94105	Category/Type [ ]	
Purpose of Disbursement Travel costs			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [ ] 2.00	
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:			Amount of Each Disbursement this Period [ ] 2.00	
Full Name (Last, First, Middle Initial) <b>C. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y 10 / 27 / 2017	
Mailing Address 182 Howard St, #8			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5307</b> Amount of Each Disbursement this Period [ ] 41.74	
City San Francisco	State CA	Zip Code 94105	Category/Type [ ]	
Purpose of Disbursement Travel costs			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [ ] 41.74	
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:			Amount of Each Disbursement this Period [ ] 41.74	
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[ ] 76.73	
<b>TOTAL</b> This Period (last page this line number only)..... ▶			[ ]	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5312

Amount of Each Disbursement this Period: 4.00

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5318

Amount of Each Disbursement this Period: 14.18

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5323

Amount of Each Disbursement this Period: 2.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 20.18

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

### A. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2017			

FEC Identification Number

**C**

**Transaction ID : SB21B.5324**

Amount of Each Disbursement this Period

122.67

Memo Item

Full Name (Last, First, Middle Initial)

### B. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2017			

FEC Identification Number

**C**

**Transaction ID : SB21B.5325**

Amount of Each Disbursement this Period

4.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Uber

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2017			

FEC Identification Number

**C**

**Transaction ID : SB21B.5339**

Amount of Each Disbursement this Period

11.24

Memo Item

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

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

<input type="text"/>	137.91
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<input type="text"/>	
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5363

Amount of Each Disbursement this Period: 3.00

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5364

Amount of Each Disbursement this Period: 2.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5366

Amount of Each Disbursement this Period: 20.45

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 25.45

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 12 / 04 / 2017		
Mailing Address 182 Howard St, #8					
City San Francisco		State CA	Zip Code 94105		
Purpose of Disbursement Travel costs		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:				FEC Identification Number C <b>Transaction ID : SB21B.5367</b> Amount of Each Disbursement this Period 12.52 <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>B. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 12 / 04 / 2017		
Mailing Address 182 Howard St, #8					
City San Francisco		State CA	Zip Code 94105		
Purpose of Disbursement Travel costs		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:				FEC Identification Number C <b>Transaction ID : SB21B.5368</b> Amount of Each Disbursement this Period 6.30 <input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) <b>C. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 12 / 04 / 2017		
Mailing Address 182 Howard St, #8					
City San Francisco		State CA	Zip Code 94105		
Purpose of Disbursement Travel costs		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:				FEC Identification Number C <b>Transaction ID : SB21B.5369</b> Amount of Each Disbursement this Period 3.00 <input type="checkbox"/> Memo Item	
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			21.82		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 04 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5370

Amount of Each Disbursement this Period

3.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 04 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5371

Amount of Each Disbursement this Period

3.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Travel costs

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2017

FEC Identification Number

C

Transaction ID : SB21B.5372

Amount of Each Disbursement this Period

40.31

Memo Item

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

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

46.31

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5376

Amount of Each Disbursement this Period: 28.37

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5377

Amount of Each Disbursement this Period: 5.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5384

Amount of Each Disbursement this Period: 55.99

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 89.36

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5385</b>	
City San Francisco	State CA	Zip Code 94105	Amount of Each Disbursement this Period [ ] 20.24
Purpose of Disbursement Travel costs		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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 12 / 18 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5394</b>	
City San Francisco	State CA	Zip Code 94105	Amount of Each Disbursement this Period [ ] 6.30
Purpose of Disbursement Travel costs		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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Uber</b>		Date of Disbursement MM / DD / YYYY 12 / 18 / 2017	
Mailing Address 182 Howard St, #8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5395</b>	
City San Francisco	State CA	Zip Code 94105	Amount of Each Disbursement this Period [ ] 6.48
Purpose of Disbursement Travel costs		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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

33.02

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard St, #8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Travel costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 21 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5397**

Amount of Each Disbursement this Period: 11.28

Memo Item

**B. Urban League of SW Ohio**

Full Name (Last, First, Middle Initial)

Mailing Address 3458 Reading Rd

City Cincinnati State OH Zip Code 45229

Purpose of Disbursement Event ticket

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5191**

Amount of Each Disbursement this Period: 300.00

Memo Item

**C. Via Vite**

Full Name (Last, First, Middle Initial)

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder Meeting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.5155**

Amount of Each Disbursement this Period: 41.19

Memo Item

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

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

352.47

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. Via Vite**

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5178  
Amount of Each Disbursement this Period  
45.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. Via Vite**

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5302  
Amount of Each Disbursement this Period  
49.69

Memo Item

Full Name (Last, First, Middle Initial)

**C. Via Vite**

Mailing Address 520 Vine St

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement Stakeholder meeting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.5351  
Amount of Each Disbursement this Period  
43.33

Memo Item

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

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

138.42

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Washington Platform</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2017	
Mailing Address 1000 Elm St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5192</b> Amount of Each Disbursement this Period [ ] 32.22	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Washington Platform</b>		Date of Disbursement MM / DD / YYYY 12 / 18 / 2017	
Mailing Address 1000 Elm St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5396</b> Amount of Each Disbursement this Period [ ] 14.77	
City Cincinnati	State OH	Zip Code 45202	Category/ Type [ ]
Purpose of Disbursement Stakeholder meeting		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Xavier University</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2017	
Mailing Address 3800 Victory Parkway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5380</b> Amount of Each Disbursement this Period [ ] 300.00	
City Cincinnati	State OH	Zip Code 45207	Category/ Type [ ]
Purpose of Disbursement Event ticket		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 346.99
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 32597.54

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN BARTLETT FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2017

Mailing Address PO BOX 3544

FEC Identification Number

**C** C00649673

City WAYNE State NJ Zip Code 07474

**Transaction ID : SB23.5272**

Purpose of Disbursement  
Contribution

Amount of Each Disbursement this Period

250.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Memo Item

State: NJ District: 11

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

FEC Identification Number

**C**

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

FEC Identification Number

**C**

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

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

250.00

250.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Cincinnatus PAC**

Full Name (Last, First, Middle Initial) <b>A. Friends of Lesley Jones</b>		Date of Disbursement MM / DD / YYYY 11 / 07 / 2017	
Mailing Address 2651 W North Bend Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.5330</b> Amount of Each Disbursement this Period [REDACTED] 1000.00	
City Cincinnati	State OH	Zip Code 45329	Category/ Type [REDACTED]
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
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) <b>B. Friends of Nan Whaley</b>		Date of Disbursement MM / DD / YYYY 12 / 27 / 2017	
Mailing Address 443 E 6th St		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.5392</b> Amount of Each Disbursement this Period [REDACTED] 1000.00	
City Dayton	State OH	Zip Code 45402	Category/ Type [REDACTED]
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
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) <b>C. Garry for Council</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address 178 Woolper Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.5322</b> Amount of Each Disbursement this Period [REDACTED] 2000.00	
City Cincinnati	State OH	Zip Code 45220	Category/ Type [REDACTED]
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



