

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 6623
Check if different than previously reported. (ACC) Cleveland OH 44101

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00657197 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period [10] / [04] / [2017] through [12] / [31] / [2017]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Hubay, Scott, M., ,
Type or Print Name of Treasurer

Signature of Treasurer Hubay, Scott, M., , [Electronically Filed] Date [12] / [31] / [2017]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Cleveland Forward 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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="325500.00"/>	<input type="text" value="325500.00"/>
(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="325500.00"/>	<input type="text" value="325500.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="313692.79"/>	<input type="text" value="313692.79"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="11807.21"/>	<input type="text" value="11807.21"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

Cleveland Forward PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	215500.00	215500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	215500.00	215500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	70000.00	70000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	285500.00	285500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	40000.00	40000.00
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)).....▶	325500.00	325500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	325500.00	325500.00

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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.....	40000.00	40000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	273692.79	273692.79
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)) ..	313692.79	313692.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	313692.79	313692.79

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	285500.00	285500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	285500.00	285500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 OF 22
	<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)
Cleveland Forward PAC

A. Finch, Wesley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3625 Carlton Place
 City Boca Raton State FL Zip Code 33496-4006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Finch Group Occupation (for Individual) Chairman
 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 / 19 / 2017
Transaction ID : SA11AI.4105
 Amount of Each Receipt this Period
 5000.00
 Memo Item Contribution

B. Haslam, James, A., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 10528
 City Knoxville State TN Zip Code 37939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cleveland Browns Football Co. Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2017
Transaction ID : SA11AI.4110
 Amount of Each Receipt this Period
 10000.00
 Memo Item Contribution

C. Haslam, Susan, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 10528
 City Knoxville State TN Zip Code 37939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cleveland Browns Football Co. Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2017
Transaction ID : SA11AI.4107
 Amount of Each Receipt this Period
 10000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	25000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<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)
Cleveland Forward PAC

A. Lucarelli, Jason, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3740 Carnegie Ave.
 City Cleveland State OH Zip Code 44113-2295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Minute Men Staffing Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 13 / 2017
Transaction ID : SA11AI.4102
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

B. Lucarelli, Jason, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3740 Carnegie Ave.
 City Cleveland State OH Zip Code 44113-2295
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Minute Men Staffing Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.4104
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

C. Mandel, Morton, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 Lakeside Ave.
 City Cleveland State OH Zip Code 44114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Parkwood Corp. Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 26 / 2017
Transaction ID : SA11AI.4118
 Amount of Each Receipt this Period 25000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	125000.00
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 8 OF 22
	<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)
Cleveland Forward PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Ratner, Albert, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2017
Mailing Address 50 Public Square Suite 1600			Transaction ID : SA11AI.4099
City Cleveland	State OH	Zip Code 44113-2295	Amount of Each Receipt this Period 65000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Forest City Enterprises Inc.		Occupation (for Individual) Co-Chairman Emeritus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 65000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ronayne, Christopher, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2017
Mailing Address 10500 Lake Ave.			Transaction ID : SA11AI.4120
City Cleveland	State OH	Zip Code 44102-1208	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) University Circle Inc.		Occupation (for Individual) President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.			Date of Receipt M M M / D D D / Y Y Y Y Y Y
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	65500.00
TOTAL This Period (last page this line number only).....▶	215500.00

**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 9 OF 22
<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)
Cleveland Forward PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. First Interstate Properties Ltd.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2017
Mailing Address 25333 Cedar Rd. Suite 300		Transaction ID : SA11C.4115
City Lyndhurst	State OH	Zip Code 44124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jack Ohio LLC		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2017
Mailing Address 570 Monroe Ave.		Transaction ID : SA11C.4131
City Detroit	State MI	Zip Code 48226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50000.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KEYCORP ADVOCATES FUND		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 13 / 2017
Mailing Address 127 PUBLIC SQUARE OH-01-27-0200		Transaction ID : SA11C.4165
City CLEVELAND	State OH	Zip Code 44114
FEC ID number of contributing federal political committee. C C00073155		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....	60000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
<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)
Cleveland Forward PAC

A. Samuel H. Miller Rev. Trust

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

Mailing Address 50 Public Square
Suite 1100

City Cleveland State OH Zip Code 44113

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 ▼ 10000.00

Date of Receipt: 10 / 24 / 2017
Transaction ID : SA11C.4113

Amount of Each Receipt this Period: 10000.00

Memo Item Contribution

B.

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

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

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	70000.00

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

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

FOR LINE NUMBER: PAGE 11 OF 22
(check only one)

<input 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
<input checked="" type="checkbox"/> 13								

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NAME OF COMMITTEE (In Full)
Cleveland Forward PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ratner, Albert, , ,

Mailing Address 50 Public Square
Suite 1600

City Cleveland State OH Zip Code 44113-2295

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

Name of Employer (for Individual) Forest City Enterprises Inc. Occupation (for Individual) Co-Chairman Emeritus

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
105000.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2017

Transaction ID : SA13.4124

Amount of Each Receipt this Period
40000.00

Memo Item
Loan Received

B. 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
MM / DD / YYYY

Amount of Each Receipt this Period

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	40000.00
TOTAL This Period (last page this line number only).....▶	40000.00

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 checked="" 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)
Cleveland Forward PAC

Full Name (Last, First, Middle Initial)

A. Ratner, Albert, , ,

Mailing Address 50 Public Square
Suite 1600

City Cleveland State OH Zip Code 44113-2295

Purpose of Disbursement
Loan Repayment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB26.4125
Amount of Each Disbursement this Period

40000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

40000.00

40000.00

**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)
Cleveland Forward PAC

Full Name (Last, First, Middle Initial) A. Brothers Printing		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017	
Mailing Address 2000 Euclid Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB29.4133 Amount of Each Disbursement this Period [REDACTED] 2770.20	
City Cleveland State OH Zip Code 44115	Purpose of Disbursement Printing Costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 004 <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) B. Conway, Chuck, , ,		Date of Disbursement MM / DD / YYYY 10 / 26 / 2017	
Mailing Address 17325 Euclid Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB29.4138 Amount of Each Disbursement this Period [REDACTED] 1150.00	
City Cleveland State OH Zip Code 44112	Purpose of Disbursement Field Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 004 <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) C. Conway, Chuck, , ,		Date of Disbursement MM / DD / YYYY 10 / 27 / 2017	
Mailing Address 17325 Euclid Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB29.4141 Amount of Each Disbursement this Period [REDACTED] 500.00	
City Cleveland State OH Zip Code 44112	Purpose of Disbursement Field Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 004 <input type="checkbox"/> Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 4420.20	
TOTAL 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 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)
Cleveland Forward PAC

A. Conway, Chuck, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17325 Euclid Ave.

City Cleveland State OH Zip Code 44112

Purpose of Disbursement Field consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB29.4139

Amount of Each Disbursement this Period: 700.00

Memo Item

B. Conway, Chuck, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17325 Euclid Ave.

City Cleveland State OH Zip Code 44112

Purpose of Disbursement Field - Literature Distribution

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 : SB29.4137

Amount of Each Disbursement this Period: 1180.00

Memo Item

C. Conway, Chuck, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 17325 Euclid Ave.

City Cleveland State OH Zip Code 44112

Purpose of Disbursement Field Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB29.4135

Amount of Each Disbursement this Period: 3065.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4945.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Cleveland Forward PAC

Full Name (Last, First, Middle Initial) A. Conway, Chuck, , ,		Date of Disbursement MM / DD / YYYY 11 / 08 / 2017	
Mailing Address 17325 Euclid Ave.		FEC Identification Number C [REDACTED]	
City Cleveland	State OH	Zip Code 44112	Transaction ID : SB29.4140
Purpose of Disbursement Field Consulting - Election Day		Category/ Type 004	Amount of Each Disbursement this Period 700.00
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. Hotcards		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017	
Mailing Address 2400 Superior Ave. E		FEC Identification Number C [REDACTED]	
City Cleveland	State OH	Zip Code 44114	Transaction ID : SB29.4142
Purpose of Disbursement Yard Signs		Category/ Type 004	Amount of Each Disbursement this Period 619.92
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) C. Hubay LLC		Date of Disbursement MM / DD / YYYY 11 / 01 / 2017	
Mailing Address 1950 West 45th St.		FEC Identification Number C [REDACTED]	
City Cleveland	State OH	Zip Code 44102	Transaction ID : SB29.4144
Purpose of Disbursement Compliance & Legal Services		Category/ Type 001	Amount of Each Disbursement this Period 2250.00
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:			

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

3569.92

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 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)
Cleveland Forward PAC

Full Name (Last, First, Middle Initial)

A. Hubay LLC

Mailing Address 1950 West 45th St.

City Cleveland State OH Zip Code 44102

Purpose of Disbursement
Compliance & Legal Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.4146
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Huntington National Bank

Mailing Address 11457 Mayfield Rd.

City Cleveland State OH Zip Code 44106

Purpose of Disbursement
Bank wire fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.4147
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Huntington National Bank

Mailing Address 11457 Mayfield Rd.

City Cleveland State OH Zip Code 44106

Purpose of Disbursement
Bank transfer fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.4167
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Cleveland Forward PAC

Full Name (Last, First, Middle Initial)

A. Huntington National Bank

Mailing Address 11457 Mayfield Rd.

City Cleveland State OH Zip Code 44106

Purpose of Disbursement
Bank service charges

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.4149
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Main Street Communications

Mailing Address 92 Adriatic Ave.

City Tampa State FL Zip Code 33606

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.4155
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Main Street Communications

Mailing Address 92 Adriatic Ave.

City Tampa State FL Zip Code 33606

Purpose of Disbursement
Paid Communications

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.4160
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Cleveland Forward PAC

Full Name (Last, First, Middle Initial) A. Main Street Communications		Date of Disbursement MM / DD / YYYY 10 / 20 / 2017
Mailing Address 92 Adriatic Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB29.4150 Amount of Each Disbursement this Period [REDACTED] 121470.00
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement Paid Communications		004 Category/Type
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. Main Street Communications		Date of Disbursement MM / DD / YYYY 10 / 23 / 2017
Mailing Address 92 Adriatic Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB29.4161 Amount of Each Disbursement this Period [REDACTED] 2493.00
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement Paid Communications		004 Category/Type
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) C. Main Street Communications		Date of Disbursement MM / DD / YYYY 10 / 25 / 2017
Mailing Address 92 Adriatic Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB29.4157 Amount of Each Disbursement this Period [REDACTED] 3293.00
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement Paid Communications		004 Category/Type
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 127256.00
TOTAL 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 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)
Cleveland Forward PAC

Full Name (Last, First, Middle Initial) A. Main Street Communications			Date of Disbursement M M / D D / Y Y Y Y Y 10 / 26 / 2017	
Mailing Address 92 Adriatic Ave.			FEC Identification Number C [] Transaction ID : SB29.4152 Amount of Each Disbursement this Period [] 45585.00	
City Tampa	State FL	Zip Code 33606	Category/Type 004	
Purpose of Disbursement Paid Communications			Memo Item <input type="checkbox"/>	
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:		Amount of Each Disbursement this Period [] 45585.00		
Full Name (Last, First, Middle Initial) B. Main Street Communications			Date of Disbursement M M / D D / Y Y Y Y Y 10 / 26 / 2017	
Mailing Address 92 Adriatic Ave.			FEC Identification Number C [] Transaction ID : SB29.4159 Amount of Each Disbursement this Period [] 2893.00	
City Tampa	State FL	Zip Code 33606	Category/Type 004	
Purpose of Disbursement Paid Communications			Memo Item <input type="checkbox"/>	
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:		Amount of Each Disbursement this Period [] 2893.00		
Full Name (Last, First, Middle Initial) C. Main Street Communications			Date of Disbursement M M / D D / Y Y Y Y Y 10 / 26 / 2017	
Mailing Address 92 Adriatic Ave.			FEC Identification Number C [] Transaction ID : SB29.4163 Amount of Each Disbursement this Period [] 42.00	
City Tampa	State FL	Zip Code 33606	Category/Type 004	
Purpose of Disbursement Paid Communications			Memo Item <input type="checkbox"/>	
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:		Amount of Each Disbursement this Period [] 42.00		
SUBTOTAL of Disbursements This Page (optional).....			[] 48520.00	
TOTAL This Period (last page this line number only).....			[]	

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Cleveland Forward PAC

Full Name (Last, First, Middle Initial)

A. Main Street Communications

Mailing Address 92 Adriatic Ave.

City
Tampa

State
FL

Zip Code
33606

Purpose of Disbursement
Paid Communications

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 30 / 2017

FEC Identification Number

C
Transaction ID : SB29.4154
Amount of Each Disbursement this Period
17000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Main Street Communications

Mailing Address 92 Adriatic Ave.

City
Tampa

State
FL

Zip Code
33606

Purpose of Disbursement

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 30 / 2017

FEC Identification Number

C
Transaction ID : SB29.4158
Amount of Each Disbursement this Period
2907.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Main Street Communications

Mailing Address 92 Adriatic Ave.

City
Tampa

State
FL

Zip Code
33606

Purpose of Disbursement
Paid Communications

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 02 / 2017

FEC Identification Number

C
Transaction ID : SB29.4153
Amount of Each Disbursement this Period
37022.00

Memo Item

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

56929.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Cleveland Forward PAC

Full Name (Last, First, Middle Initial) A. Main Street Communications		Date of Disbursement MM / DD / YYYY 11 / 03 / 2017	
Mailing Address 92 Adriatic Ave.		FEC Identification Number C [] Transaction ID : SB29.4156 Amount of Each Disbursement this Period [] 7250.00	
City Tampa	State FL	Zip Code 33606	Category/ Type 004
Purpose of Disbursement Paid Communications			
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. Main Street Communications		Date of Disbursement MM / DD / YYYY 11 / 08 / 2017	
Mailing Address 92 Adriatic Ave.		FEC Identification Number C [] Transaction ID : SB29.4162 Amount of Each Disbursement this Period [] 561.67	
City Tampa	State FL	Zip Code 33606	Category/ Type 004
Purpose of Disbursement Paid Communications			
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) C.		Date of Disbursement MM / DD / YYYY [] / [] / []	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement			
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 7811.67
TOTAL This Period (last page this line number only).....▶	[] 273692.79

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Cleveland Forward PAC** Transaction ID : **SC/10.4124**

LOAN SOURCE Full Name (Last, First, Middle Initial) N <input type="checkbox"/> Memo Item Ratner, Albert, , ,		Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 50 Public Square Suite 1600		
City Cleveland	State OH	ZIP Code 44113-2295

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	40000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 11 / 01 / 2017	MM / DD / YYYY 11/8/2017	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	0.00
TOTALS This Period (last page in this line only)	0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.