

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
**Wenstrup for Congress**

ADDRESS (number and street) PO Box 9551  
 Check if different than previously reported. (ACC) Cincinnati OH 45209-0551

2. **FEC IDENTIFICATION NUMBER** C C00497818 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
OH 02

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2015 through M M / D D / Y Y Y Y 03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert E. Carroll

Signature of Treasurer Robert E. Carroll *[Electronically Filed]* Date M M / D D / Y Y Y Y 04 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Wenstrup for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	177450.07	180813.07
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	177450.07	180813.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	59101.24	97019.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	59101.24	97019.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	385594.68	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Wenstrup for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y 03 / 31 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	137321.6	139121.6
(ii) Unitemized.....	15628.47	17191.47
(iii) TOTAL of contributions from individuals ▶	152950.07	156313.07
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	24500	24500
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	177450.07	180813.07
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	0
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0	0
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	177450.07	180813.07

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	59101.24	97019.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	52500
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	52500
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS .....	0	0
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	59101.24	149519.92

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	267245.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	177450.07
25. SUBTOTAL (add Line 23 and Line 24).....	444695.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	59101.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	385594.68

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rodger Davis**

Mailing Address 824 Yale Avenue

City Terrace Park State OH Zip Code 45174-1258

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 08 / 2015

**Transaction ID : A-CF6207**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Ronald Joseph**

Mailing Address 250 East 5th Street

City Cincinnati State OH Zip Code 45202-4119

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

Name of Employer Joseph Auto Group Occupation Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2015

**Transaction ID : A-CF6225**

Amount of Each Receipt this Period  
 2500

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Atkins**

Mailing Address 1201 Edgecliff Place Apt. 1061

City Cincinnati State OH Zip Code 45206-2898

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2015

**Transaction ID : A-CF6240**

Amount of Each Receipt this Period  
 2600

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

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

6100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joyce Farmer**

Mailing Address 8525 Fox Cub Lane

City Cincinnati State OH Zip Code 45243-1023

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2015**

**Transaction ID : A-CF6237**

Amount of Each Receipt this Period  
**2600**

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

Mailing Address 8525 Fox Cub Lane

City Cincinnati State OH Zip Code 45243-1023

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2015**

**Transaction ID : A-CF6238**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**R.T. Farmer**

Mailing Address 6847 Cintas Boulevard

City Mason State OH Zip Code 45040-9107

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

Name of Employer Cintas Corporation Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2015**

**Transaction ID : A-CF6235**

Amount of Each Receipt this Period  
**2600**

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

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

**7800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**R.T. Farmer**

Mailing Address 6847 Cintas Boulevard

City Mason State OH Zip Code 45040-9107

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

Name of Employer Cintas Corporation Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2015**

**Transaction ID : A-CF6236**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**William Hockensmith**

Mailing Address 5409 Belle Meade Drive

City Batavia State OH Zip Code 45103-8550

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2015**

**Transaction ID : A-CF6255**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Donald J. Lothrop**

Mailing Address 7854 Bicentennial Place

City Montgomery State OH Zip Code 45249-3437

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2015**

**Transaction ID : A-CF6241**

Amount of Each Receipt this Period  
**2000**

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

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

**4800.00**

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

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

FOR LINE NUMBER: PAGE 8 OF 63  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Vince Mauer**

Mailing Address 7208 Concordridge Drive

City State Zip Code  
Cincinnati OH 45244-3604

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

Name of Employer Occupation  
Frost Brown Todd Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1800**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 26 / 2015**

**Transaction ID : A-CF6242**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Joan Cavally**

Mailing Address 1850 Columbia Parkway

City State Zip Code  
Cincinnati OH 45202-1705

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 05 / 2015**

**Transaction ID : A-CF6301**

Amount of Each Receipt this Period  
**200**

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

Mailing Address 107 Shillito Place  
Suite 7B

City State Zip Code  
Cincinnati OH 45202-2370

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

Name of Employer Occupation  
Ulmer & Berne, LLP Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 05 / 2015**

**Transaction ID : A-CF6313**

Amount of Each Receipt this Period  
**250**

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

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

**950.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susanna J. McGuire**

Mailing Address 12070 Lakefront Drive

City Hillsboro State OH Zip Code 45133-9767

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

Name of Employer: Joey's Pizza Occupation: Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2015

**Transaction ID : A-CF6364**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Craig H. Turner**

Mailing Address 8445 US Highway 50

City Hillsboro State OH Zip Code 45133-7112

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

Name of Employer: Turner & Son Funeral Home Occupation: Funeral Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **210**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2015

**Transaction ID : A-CF6339**

Amount of Each Receipt this Period  
**140**

**C.** Full Name (Last, First, Middle Initial)  
**Drew Morgan**

Mailing Address 5325 Salem Road

City Cincinnati State OH Zip Code 45230-1327

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2015

**Transaction ID : A-CF6292**

Amount of Each Receipt this Period  
**500**

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

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

**890.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eric E. Stewart**

Mailing Address 10 N Greenbrier Street

City State Zip Code  
Arlington VA 22203-1231

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

Name of Employer Occupation  
Williams + Jensen Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2015

**Transaction ID : A-CF6378**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Advanced Foot Care LLP**

Mailing Address 2368 Battlefield Parkway

City State Zip Code  
Fort Oglethorpe GA 30742

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6420**

Amount of Each Receipt this Period  
250

See Memo: Verified Non-Corporate

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

**C.** Full Name (Last, First, Middle Initial)  
**Ira Kraus**

Mailing Address 20 Dogwood Trail

City State Zip Code  
Ringgold GA 30736

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

Name of Employer Occupation  
Advanced Foot Care Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-PIP17**

Amount of Each Receipt this Period  
250

See Memo: Verified Non-Corporate

**[MEMO ITEM]**  
Partnership Itemization Memo

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Romola Allen**

Mailing Address 1747 East McMillan Street

City State Zip Code  
Cincinnati OH 45206-2168

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 18 / 2015**

**Transaction ID : A-CF6387**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Barger**

Mailing Address 3080 Cypress Pond Pass

City State Zip Code  
Duluth GA 30097-3718

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

Name of Employer Occupation  
Selective Insurance Insurance Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 18 / 2015**

**Transaction ID : A-CF6398**

Amount of Each Receipt this Period  
**150**

**C.** Full Name (Last, First, Middle Initial)  
**Neil Bortz**

Mailing Address 1055 Saint Paul Place

City State Zip Code  
Cincinnati OH 45202-6042

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

Name of Employer Occupation  
Towne Properties Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 18 / 2015**

**Transaction ID : A-CF6411**

Amount of Each Receipt this Period  
**500**

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

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

**1150.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 5355 Stone Barn Road

City Cincinnati State OH Zip Code 45243-3748

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

Name of Employer Cincinnati Bengals Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6418**

Amount of Each Receipt this Period  
 2700

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

Mailing Address 5355 Stone Barn Road

City Cincinnati State OH Zip Code 45243-3748

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

Name of Employer Cincinnati Bengals Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6419**

Amount of Each Receipt this Period  
 2700

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

Mailing Address 312 Elm Street Suite 2600

City Cincinnati State OH Zip Code 45202-2728

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

Name of Employer Castellini Management Company Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6415**

Amount of Each Receipt this Period  
 2700

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 312 Elm Street  
Suite 2600

City Cincinnati State OH Zip Code 45202-2728

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

Name of Employer Castellini Management Company Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6416**

Amount of Each Receipt this Period  
 2500

**B.** Full Name (Last, First, Middle Initial)  
**Susan Castellini**

Mailing Address 2180 Grandin Road

City Cincinnati State OH Zip Code 45208-3306

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6413**

Amount of Each Receipt this Period  
 2700

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

Mailing Address 2180 Grandin Road

City Cincinnati State OH Zip Code 45208-3306

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6414**

Amount of Each Receipt this Period  
 2500

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

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

7700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**W. Stuart Dornette**

Mailing Address 329 Bishopsbridge Drive

City State Zip Code  
Cincinnati OH 45255-3948

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

Name of Employer Occupation  
Taft Stettinius & Hollister Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6421**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**George Joseph**

Mailing Address 2621 Handasyde Avenue

City State Zip Code  
Cincinnati OH 45208-2717

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

Name of Employer Occupation  
Joseph Auto Auto Dealer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6412**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Paul Niklas**

Mailing Address 3435 Golden Avenue  
Apartment 1402

City State Zip Code  
Cincinnati OH 45226

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

Name of Employer Occupation  
Self-Employed Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6401**

Amount of Each Receipt this Period  
**300**

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

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

**5600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen Rohde**

Mailing Address 704 Tweed Avenue

City State Zip Code  
Cincinnati OH 45226-1315

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

Name of Employer Occupation  
Self-Employed Owner/Funeral Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6394**

Amount of Each Receipt this Period  
**300**

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

Mailing Address 2444 Madison Road  
Unit 1406

City State Zip Code  
Cincinnati OH 45208-1277

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

Name of Employer Occupation  
Richard Consulting Government Relations Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 18 / 2015

**Transaction ID : A-CF6379**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 262 6th Street

City State Zip Code  
Bonita Springs FL 34134-7414

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : A-CF6371**

Amount of Each Receipt this Period  
**100**

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

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

**900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jack Tucker**

Mailing Address 10 Garden Place

City State Zip Code  
Cincinnati OH 45208

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

Name of Employer Occupation  
Robbins Kelly Patterson Tuck Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2015

**Transaction ID : A-CF6374**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Jennifer Williams**

Mailing Address 4300 Willow Hills Lane

City State Zip Code  
Cincinnati OH 45243-4234

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2015

**Transaction ID : A-CF6425**

Amount of Each Receipt this Period  
**2700**

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Williams**

Mailing Address 4300 Willow Hills Lane

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
North American Properties President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 25 / 2015

**Transaction ID : A-CF6424**

Amount of Each Receipt this Period  
**2700**

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

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

**5650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rodger Davis**

Mailing Address 824 Yale Avenue

City Terrace Park State OH Zip Code 45174-1258

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 27 / 2015**

**Transaction ID : A-CF6426**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Karl J. Grafe**

Mailing Address 8345 Arapaho Lane

City Cincinnati State OH Zip Code 45243-2717

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

Name of Employer American Financial Group, Inc. Occupation Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 07 / 2015**

**Transaction ID : A-CF6434**

Amount of Each Receipt this Period  
**2700**

**C.** Full Name (Last, First, Middle Initial)  
**DN Property Investments LLC**

Mailing Address 2135 Dana Avenue Suite 200

City Cincinnati State OH Zip Code 45207-1327

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 09 / 2015**

**Transaction ID : A-CF6447**

Amount of Each Receipt this Period  
**1100**

SEE MEMO ITEM/Verified Non-Corporate

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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

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

**4800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 86 Watch Hill Lane

City State Zip Code  
Newport KY 41071-2400

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

Name of Employer Occupation  
Neyer Construction Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1100**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 09 / 2015**

**Transaction ID : A-PIP14**

Amount of Each Receipt this Period  
**1100**

SEE MEMO ITEM/Verified Non-Corporate

**[MEMO ITEM]**  
Partnership Itemization Memo

**B.** Full Name (Last, First, Middle Initial)  
**Otto Budig Jr.**

Mailing Address 1100 Gest Street

City State Zip Code  
Cincinnati OH 45203-1114

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

Name of Employer Occupation  
Budco Group President & Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 09 / 2015**

**Transaction ID : A-CF6446**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Edward Castleberry**

Mailing Address 1041 Catawba Valley Drive

City State Zip Code  
Cincinnati OH 45226-1701

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 09 / 2015**

**Transaction ID : A-CF6449**

Amount of Each Receipt this Period  
**250**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 8997 Terwilligersridge Drive

City Cincinnati State OH Zip Code 45249-2762

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

Name of Employer The Christ Hospital Occupation Orthopedic Surgeon

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2015

**Transaction ID : A-CF6461**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Steven Miller**

Mailing Address 3699 Fawnrun Drive

City Cincinnati State OH Zip Code 45241-3835

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

Name of Employer Viking Partners, LLC Occupation Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2015

**Transaction ID : A-CF6445**

Amount of Each Receipt this Period  
 1000

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

Mailing Address 4925 Willow Hills Lane

City Cincinnati State OH Zip Code 45243

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2015

**Transaction ID : A-CF6457**

Amount of Each Receipt this Period  
 250

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 20 OF 63  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 8677 Emerald Isle

City State Zip Code  
Mason OH 45040-5016

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

Name of Employer Occupation  
Chemed Corporation Chief Financial Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 09 / 2015

**Transaction ID : A-CF6444**

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Anne Kereiakes**

Mailing Address 7405 Old Hickory Lane

City State Zip Code  
Cincinnati OH 45243-1454

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2015

**Transaction ID : A-CF6439**

Amount of Each Receipt this Period  
2700

**C.** Full Name (Last, First, Middle Initial)  
**Dean Kereiakes**

Mailing Address 7405 Old Hickory Lane

City State Zip Code  
Cincinnati OH 45243-1454

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

Name of Employer Occupation  
The Christ Hospital Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2015

**Transaction ID : A-CF6440**

Amount of Each Receipt this Period  
2700

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joan Cavally**

Mailing Address 1850 Columbia Parkway

City State Zip Code  
Cincinnati OH 45202-1705

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A-CF6528**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Brynne Coletti**

Mailing Address 4500 Muchmore Road

City State Zip Code  
Cincinnati OH 45243-4106

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

Name of Employer Occupation  
Kenzie's Closet Executive Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A-CF6476**

Amount of Each Receipt this Period  
**2700**

**C.** Full Name (Last, First, Middle Initial)  
**Brynne Coletti**

Mailing Address 4500 Muchmore Road

City State Zip Code  
Cincinnati OH 45243-4106

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

Name of Employer Occupation  
Kenzie's Closet Executive Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A-CF6477**

Amount of Each Receipt this Period  
**2700**

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

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

**5450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 4885 Drake Road

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
Keating Muething & Klekamp Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2015**

**Transaction ID : A-CF6474**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Coletti**

Mailing Address 4885 Drake Road

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
Keating Muething & Klekamp Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2015**

**Transaction ID : A-CF6475**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 633 W 3rd Street

City State Zip Code  
Covington KY 41011-1203

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

Name of Employer Occupation  
Automanage of California, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2015**

**Transaction ID : A-CF6481**

Amount of Each Receipt this Period  
**2500**

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

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

**7900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Delian Gettler**

Mailing Address 1 Filson Place

City State Zip Code  
Cincinnati OH 45202-1600

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

Name of Employer Occupation  
Trusthouse, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A-CF6480**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**William Posey**

Mailing Address 3453 Fawnrun Drive

City State Zip Code  
Cincinnati OH 45241-3856

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

Name of Employer Occupation  
Keating Muething & Klekamp Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A-CF6478**

Amount of Each Receipt this Period  
**2700**

**C.** Full Name (Last, First, Middle Initial)  
**Matthew J Smith**

Mailing Address 1925 S Atlantic Avenue  
Apt. 701

City State Zip Code  
Daytona Beach Shores FL 32118-5040

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A-CF6479**

Amount of Each Receipt this Period  
**2700**

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

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

**8100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen J Wolfe**

Mailing Address 13349 Strait Creek Road

City State Zip Code  
Peebles OH 45660

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

**Transaction ID : A-CF6523**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**William Hockensmith**

Mailing Address 5409 Belle Meade Drive

City State Zip Code  
Batavia OH 45103-8550

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : A-CF6626**

Amount of Each Receipt this Period  
200

**C.** Full Name (Last, First, Middle Initial)  
**Jim Koenig**

Mailing Address 5450 Sheits Road

City State Zip Code  
Cincinnati OH 45252-2136

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

Name of Employer Occupation  
Aurora Casket Company Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
531.6

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 16 / 2015

**Transaction ID : A-CF6628**

Amount of Each Receipt this Period  
330

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

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

1530.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 25 OF 63

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy L Schlemmer**

Mailing Address 602 St Andrews Circle

City Milford State OH Zip Code 45150-2984

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 16 / 2015**

**Transaction ID : A-CF6650**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Romola Allen**

Mailing Address 1747 East McMillan Street

City Cincinnati State OH Zip Code 45206-2168

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

Name of Employer Information Requested Occupation Information Requested

Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2015**

**Transaction ID : A-CF6624**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Susanna J. McGuire**

Mailing Address 12070 Lakefront Drive

City Hillsboro State OH Zip Code 45133-9767

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

Name of Employer Information Requested Occupation Information Requested

Joe's Pizza Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2015**

**Transaction ID : A-CF6670**

Amount of Each Receipt this Period  
**250**

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

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

**2250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth I. Cohen**

Mailing Address 7615 French Park Place

City State Zip Code  
Cincinnati OH 45237

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

Name of Employer Occupation  
Cohen Brothers, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A-CF6639**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Donna L. Grafe**

Mailing Address 8345 Arapaho Lane

City State Zip Code  
Cincinnati OH 45243-2717

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A-CF6527**

Amount of Each Receipt this Period  
**2700**

**C.** Full Name (Last, First, Middle Initial)  
**W. E Minor**

Mailing Address 1071 Celestial Street  
Apt. 1204

City State Zip Code  
Cincinnati OH 45202-1648

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

Name of Employer Occupation  
Keating Muething Klekamp Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 20 / 2015**

**Transaction ID : A-CF6635**

Amount of Each Receipt this Period  
**250**

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

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

**3450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steven J. Berlin**

Mailing Address 6501 Red Hook Plaza  
Suite 201

City St Thomas State VI Zip Code 00802-1311

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

Name of Employer General Podiatric Medicine Occupation Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : A-CF6606**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Julia Heidt**

Mailing Address 9075 Cunningham Road

City Cincinnati State OH Zip Code 45243-1503

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : A-CF6567**

Amount of Each Receipt this Period  
**2700**

**C.** Full Name (Last, First, Middle Initial)  
**Julia Heidt**

Mailing Address 9075 Cunningham Road

City Cincinnati State OH Zip Code 45243-1503

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : A-CF6568**

Amount of Each Receipt this Period  
**2700**

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

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

**5900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Heidt Jr.**

Mailing Address 9075 Cunningham Road

City State Zip Code  
Cincinnati OH 45243-1503

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

Name of Employer Occupation  
Wellington Orthopaedic Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : A-CF6569**

Amount of Each Receipt this Period  
**2700**

**B.** Full Name (Last, First, Middle Initial)  
**Robert Heidt Jr.**

Mailing Address 9075 Cunningham Road

City State Zip Code  
Cincinnati OH 45243-1503

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

Name of Employer Occupation  
Wellington Orthopaedic Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : A-CF6570**

Amount of Each Receipt this Period  
**2700**

**C.** Full Name (Last, First, Middle Initial)  
**Anthony Maas**

Mailing Address 200 Sales Avenue

City State Zip Code  
Harrison OH 45030-1485

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

Name of Employer Occupation  
JTM Food Group President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : A-CF6574**

Amount of Each Receipt this Period  
**1000**

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

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

**6400.00**

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

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

FOR LINE NUMBER: PAGE 29 OF 63  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin McNamara**

Mailing Address 255 E 5th Street

City State Zip Code  
Cincinnati OH 45202

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

Name of Employer Occupation  
Chemed Corporation President & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : A-CF6571**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**Ted Torbeck**

Mailing Address 11225 Rivers Edge Court

City State Zip Code  
Loveland OH 45140

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

Name of Employer Occupation  
Cincinnati Bell President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : A-CF6572**

Amount of Each Receipt this Period  
**2700**

**C.** Full Name (Last, First, Middle Initial)  
**Ted Torbeck**

Mailing Address 11225 Rivers Edge Court

City State Zip Code  
Loveland OH 45140

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

Name of Employer Occupation  
Cincinnati Bell President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 23 / 2015**

**Transaction ID : A-CF6573**

Amount of Each Receipt this Period  
**2300**

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

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

**7000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Frank J. Albers**

Mailing Address 11819 Grandstone Lane

City State Zip Code  
Montgomery OH 45249-3440

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

Name of Employer Occupation  
Kidney & Hypertension Center Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2015**

**Transaction ID : A-CF6602**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Barbara Faga**

Mailing Address 3166 Juniper Lane

City State Zip Code  
Falls Church VA 22044

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2015**

**Transaction ID : A-CF6538**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Matthew Garoufalis**

Mailing Address 1933 Hansom Court

City State Zip Code  
Naperville IL 60565

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

Name of Employer Occupation  
Profess. Footcare Specialists Podiatrist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2015**

**Transaction ID : A-CF6542**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 7229 Overton Way

City State Zip Code  
Maineville OH 45039-8607

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

Name of Employer Occupation  
Wellington Group Orthopaedic Surgeon

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2015**

**Transaction ID : A-CF6539**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Patricia Bryan**

Mailing Address 8980 Indian Ridge Lane

City State Zip Code  
Cincinnati OH 45243-3718

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF6561**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Rick Bryan**

Mailing Address 8980 Indian Ridge Lane

City State Zip Code  
Cincinnati OH 45243

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF6560**

Amount of Each Receipt this Period  
**500**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jim Koenig**

Mailing Address 5450 Sheits Road

City Cincinnati State OH Zip Code 45252-2136

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

Name of Employer Occupation  
Aurora Casket Company Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**531.6**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF6552**

Amount of Each Receipt this Period  
**201.6**

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

Mailing Address 262 6th Street

City Bonita Springs State FL Zip Code 34134-7414

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF6683**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**James D. Petricone**

Mailing Address 6857 Kenwood Road

City Cincinnati State OH Zip Code 45243-2325

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

Name of Employer Occupation  
Petricone & Pick DDS, Inc Dentist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF6554**

Amount of Each Receipt this Period  
**250**

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

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

**551.60**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 7229 Overton Way

City State Zip Code  
Maineville OH 45039-8607

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

Name of Employer Occupation  
Wellington Group Orthopaedic Surgeon

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2015**

**Transaction ID : A-CF6555**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**John Barrett**

Mailing Address 9300 Shawnee Run Road

City State Zip Code  
Cincinnati OH 45243-2826

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

Name of Employer Occupation  
Western Southern Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6684**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Christopher Bortz**

Mailing Address 921 Riverview Place

City State Zip Code  
Cincinnati OH 45202-1622

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

Name of Employer Occupation  
Towne Construction Services Construction

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2700**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6586**

Amount of Each Receipt this Period  
**2700**

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

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

**5200.00**

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

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

FOR LINE NUMBER: PAGE 34 OF 63  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

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

Mailing Address 425 Walnut Street  
Suite 1800

City Cincinnati State OH Zip Code 45202-3948

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6692**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 2613 Handasyde Avenue

City Cincinnati State OH Zip Code 45208-2717

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

Name of Employer Enerfab Occupation Chief Executive Officer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6690**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 2613 Handasyde Avenue

City Cincinnati State OH Zip Code 45208-2717

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

Name of Employer Enerfab Occupation Chief Executive Officer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6691**

Amount of Each Receipt this Period  
**2700**

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

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

**5650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Vince Mauer**

Mailing Address 7208 Concordridge Drive

City State Zip Code  
Cincinnati OH 45244-3604

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

Name of Employer Occupation  
Frost Brown Todd Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1800**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6595**

Amount of Each Receipt this Period  
**1000**

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

Mailing Address 8107 Wycliffe Drive

City State Zip Code  
Cincinnati OH 45244-2593

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

Name of Employer Occupation  
Wellington Physican

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6584**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Paul Niklas**

Mailing Address 3435 Golden Avenue  
Apartment 1402

City State Zip Code  
Cincinnati OH 45226

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

Name of Employer Occupation  
Self-Employed Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6694**

Amount of Each Receipt this Period  
**200**

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

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

**2200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Posey**

Mailing Address 3453 Fawnrun Drive

City State Zip Code  
Cincinnati OH 45241-3856

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

Name of Employer Occupation  
Keating Muething & Klekamp Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6673**

Amount of Each Receipt this Period  
**2700**

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

Mailing Address 1861 Dexter Avenue

City State Zip Code  
Cincinnati OH 45206-1459

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

Name of Employer Occupation  
Valentine Research Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6688**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Brian Vaughan**

Mailing Address 29 Locust Hill Road

City State Zip Code  
Cincinnati OH 45245-3113

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

Name of Employer Occupation  
Anesthesia Assoc. of Cinci Anesthesiologist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6689**

Amount of Each Receipt this Period  
**500**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5800.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William F Woeste**

Mailing Address 2901 Riverside Drive

City State Zip Code  
Cincinnati OH 45226-1007

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

Name of Employer Occupation  
The Beechmont Automotive Group Automotive Retailer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2015**

**Transaction ID : A-CF6599**

Amount of Each Receipt this Period  
**500**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**500.00**

**137321.60**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**General Electric PAC**

Mailing Address 1299 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2400

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2015

**Transaction ID : A-CF6375**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**National Multi Housing Council PAC (NMHC PAC)**

Mailing Address 1850 M Street NW Suite 540

City Washington State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C C00130773**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2015

**Transaction ID : A-CF6376**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Procter & Gamble Company Good Government Committee**

Mailing Address 1 Procter And Gamble Plaza

City Cincinnati State OH Zip Code 45202-3315

FEC ID number of contributing federal political committee. **C C00257329**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 12 / 2015

**Transaction ID : A-CF6377**

Amount of Each Receipt this Period  
 1000

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 39 OF 63  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

A. Full Name (Last, First, Middle Initial)  
**The Babcock & Wilcox Company Political Action Committee**

Mailing Address 2016 Mount Athos Road

City Lynchburg State VA Zip Code 24504-5447

FEC ID number of contributing federal political committee. **C C00365502**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 27 / 2015**

**Transaction ID : A-CF6431**

Amount of Each Receipt this Period  
**1000**

B. Full Name (Last, First, Middle Initial)  
**United Technologies Corporation Political Action Committee**

Mailing Address 1101 Pennsylvania Avenue NW  
Floor 10

City Washington State DC Zip Code 20004-2566

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 27 / 2015**

**Transaction ID : A-CF6432**

Amount of Each Receipt this Period  
**1000**

C. Full Name (Last, First, Middle Initial)  
**International Paper Political Action Committee (IP-PAC)**

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 200

City Washington State DC Zip Code 20004-2514

FEC ID number of contributing federal political committee. **C C00034405**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 06 / 2015**

**Transaction ID : A-CF6437**

Amount of Each Receipt this Period  
**1000**

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

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

**3000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 63
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Corporation Employees' Political Action Committee**

Mailing Address 2121 Crystal Drive  
Suite 100

City State Zip Code  
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2015

**Transaction ID : A-CF6443**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**The Boeing Company Political Action Committee**

Mailing Address 1200 Wilson Boulevard

City State Zip Code  
Arlington VA 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 09 / 2015

**Transaction ID : A-CF6442**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**American Medical Association PAC (AMA PAC)**

Mailing Address 25 Massachusetts Avenue NW  
Suite 600

City State Zip Code  
Washington DC 20001-7400

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 18 / 2015

**Transaction ID : A-CF6537**

Amount of Each Receipt this Period  
1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Duke Energy Corporation PAC**

Mailing Address 550 S Tryon Street

City State Zip Code  
Charlotte NC 28202-4200

FEC ID number of contributing federal political committee. **C C00083535**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2015

**Transaction ID : A-CF6536**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Raytheon Company Political Action Committee**

Mailing Address 1100 Wilson Boulevard  
Suite 1500

City State Zip Code  
Arlington VA 22209-3900

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2015

**Transaction ID : A-CF6575**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Action Committee for Rural Electrification (ACRE)**

Mailing Address 4301 Wilson Boulevard

City State Zip Code  
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : A-CF6679**

Amount of Each Receipt this Period  
1000

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CSX Corporation Good Government Fund**

Mailing Address 1331 Pennsylvania Avenue NW  
Suite 560

City Washington State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C C00163832**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : A-CF6678**

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**National Association of Realtors PAC (RPAC)**

Mailing Address 430 N Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : A-CF6675**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**National Beer Wholesalers Association (NBWA PAC)**

Mailing Address 1101 King Street  
Suite 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2015

**Transaction ID : A-CF6676**

Amount of Each Receipt this Period  
2500

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. USEC, Inc. Political Action Committee (Centrus Energy Corp PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 6903 Rockledge Drive  
Floor 4

City State Zip Code  
Bethesda MD 20817-1818

FEC ID number of contributing federal political committee. **C** C00355719

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2015

**Transaction ID : A-CF6677**

Amount of Each Receipt this Period  
1000

**B. Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1625 Prince Street  
Suite 225

City State Zip Code  
Alexandria VA 22314-2882

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF6685**

Amount of Each Receipt this Period  
5000

**C. Honeywell International PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 101 Constitution Avenue NW  
Suite 500 W

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : A-CF6686**

Amount of Each Receipt this Period  
1000

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

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

7000.00

24500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2015	
Mailing Address 205 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 650	
City Washington	State DC	Zip Code 20003	Transaction ID : B-E-6200	
Purpose of Disbursement Software Service		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. StraightLine Direct Marketing</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015	
Mailing Address 550 Highland Street Suite 115			Amount of Each Disbursement this Period 2299.6	
City Frederick	State MD	Zip Code 21701	Transaction ID : B-E-6216	
Purpose of Disbursement Postage		Category/ Type 003		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. Wiland Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2015	
Mailing Address PO Box 174480			Amount of Each Disbursement this Period 425.03	
City Denver	State CO	Zip Code 80217	Transaction ID : B-E-6217	
Purpose of Disbursement Postage		Category/ Type 003		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3374.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Maggie Wuellner</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 2500 <b>Transaction ID : B-E-6215</b>
City Cincinnati	State OH Zip Code 45208-2529	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 814 Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2015
Mailing Address 5827 Colfax Avenue		Amount of Each Disbursement this Period 3000 <b>Transaction ID : B-E-6218</b>
City Alexandria	State VA Zip Code 22311	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Brad Wenstrup</b>		Date of Disbursement MM / DD / YYYY 01 / 12 / 2015
Mailing Address 512 Missouri Avenue		Amount of Each Disbursement this Period 75.46 <b>Transaction ID : B-E-6220</b>
City Cincinnati	State OH Zip Code 45226-1121	
Purpose of Disbursement MEMOS DO NOT REACH ITEMIZATION	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5575.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brad Wenstrup</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2015
Mailing Address 512 Missouri Avenue		Amount of Each Disbursement this Period 345.52 <b>Transaction ID : B-E-6222</b>
City Cincinnati	State OH Zip Code 45226-1121	
Purpose of Disbursement Reimbursed- Mileage	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 60 <b>Transaction ID : B-E-6228</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PNC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address PO Box 856177		Amount of Each Disbursement this Period 1769.97 <b>Transaction ID : B-E-6224</b>
City Louisville	State KY Zip Code 40285	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2175.49
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Montgomery Inn Boathouse</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 925 Riverside Drive		Amount of Each Disbursement this Period 348.62
City Cincinnati	State OH	Zip Code 45202-1684
Purpose of Disbursement Facility Rental	Category/Type 003	
Candidate Name	Transaction ID : B-S-3074	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(01/21/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 100 West Rio Salado Parkway		Amount of Each Disbursement this Period 697.1
City Tempe	State AZ	Zip Code 85281
Purpose of Disbursement Airfare	Category/Type 002	
Candidate Name	Transaction ID : B-S-3078	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(01/21/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 100 West Rio Salado Parkway		Amount of Each Disbursement this Period 697.1
City Tempe	State AZ	Zip Code 85281
Purpose of Disbursement Airfare	Category/Type 002	
Candidate Name	Transaction ID : B-S-3077	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(01/21/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Maggie Wuellner</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 2500 <b>Transaction ID : B-E-6223</b>
City Cincinnati	State OH Zip Code 45208-2529	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. King Strategic Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2015
Mailing Address 750 North Cross Pointe Road		Amount of Each Disbursement this Period 6238.47 <b>Transaction ID : B-E-6290</b>
City Gahanna	State OH Zip Code 43230	
Purpose of Disbursement Direct Mail	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 1546.09 <b>Transaction ID : B-E-6284</b>
City Bethesda	State MD Zip Code 20814-2527	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10284.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 1500
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement Compliance Consulting	Transaction ID : B-S-3054
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(01/30/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 3610 Hacks Cross Road		Amount of Each Disbursement this Period 35.73
City Memphis	State TN	
Zip Code 38125	Purpose of Disbursement Express Shipping	Transaction ID : B-S-3056
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(01/30/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 0.36
City Bethesda	State MD	
Zip Code 20814-2527	Purpose of Disbursement E-Merchant Fees	Transaction ID : B-S-3057
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(01/30/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 63			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.5 <b>Transaction ID : B-E-6289</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Clermont County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2015
Mailing Address 197 East Main Street		Amount of Each Disbursement this Period 750 <b>Transaction ID : B-E-6285</b>
City Batavia	State OH Zip Code 45103	
Purpose of Disbursement Program Expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. 814 Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2015
Mailing Address 5827 Colfax Avenue		Amount of Each Disbursement this Period 3000 <b>Transaction ID : B-E-6287</b>
City Alexandria	State VA Zip Code 22311	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3751.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cincinnati Bell Wireless</b>			Date of Disbursement MM / DD / YYYY 02 / 03 / 2015	
Mailing Address PO Box 748002			Amount of Each Disbursement this Period 320.25	
City Cincinnati	State OH	Zip Code 45274-8002	Transaction ID : B-E-6288	
Purpose of Disbursement Utilities		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Brad Wenstrup</b>			Date of Disbursement MM / DD / YYYY 02 / 10 / 2015	
Mailing Address 512 Missouri Avenue			Amount of Each Disbursement this Period 3.57	
City Cincinnati	State OH	Zip Code 45226-1121	Transaction ID : B-E-6368	
Purpose of Disbursement MEMOS DO NOT REACH ITEMIZATION		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.	
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Paycor, Inc.</b>			Date of Disbursement MM / DD / YYYY 02 / 17 / 2015	
Mailing Address 644 Linn Street Suite 200			Amount of Each Disbursement this Period 40.53	
City Cincinnati	State OH	Zip Code 45203-1734	Transaction ID : B-E-6433	
Purpose of Disbursement Payroll Fees		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	364.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. PNC Bank</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address PO Box 856177		Amount of Each Disbursement this Period 4421.61
City Louisville	State KY	
Zip Code 40285	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-6422</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chick-fil-A</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 4238 Wilson Boulevard		Amount of Each Disbursement this Period 3069
City Arlington	State VA	
Zip Code 22203	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3066</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(02/20/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 300 1 St Street SE		Amount of Each Disbursement this Period 433.8
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3067</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of PNC Bank(02/20/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4421.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 63			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hunan Dynasty</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 215 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 318.75
City Washington State DC Zip Code 20003	Purpose of Disbursement Catering 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3073  [MEMO ITEM] Subitemization of PNC Bank(02/20/15)
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 225.1
City Atlanta State GA Zip Code 30354	Purpose of Disbursement Airfare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3068  [MEMO ITEM] Subitemization of PNC Bank(02/20/15)
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Maggie Wuellner</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 2500
City Cincinnati State OH Zip Code 45208-2529	Purpose of Disbursement Fundraising Consulting 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-6423
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mailink</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2015
Mailing Address 701 143rd Avenue NW Suite M		Amount of Each Disbursement this Period 2446.78
City Ramsey	State MN	
Zip Code 55303	Purpose of Disbursement Direct Mailing	<b>Transaction ID : B-E-6427</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2015
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1300
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Software Service	<b>Transaction ID : B-E-6428</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 324
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement E-Merchant Fees	<b>Transaction ID : B-E-6435</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4070.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 60 <b>Transaction ID : B-E-6436</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. La Petite Pierre</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2015
Mailing Address 7800 Camargo Road		Amount of Each Disbursement this Period 610 <b>Transaction ID : B-E-6429</b>
City Cincinnati	State OH Zip Code 45243	
Purpose of Disbursement Catering	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. 814 Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2015
Mailing Address 5827 Colfax Avenue		Amount of Each Disbursement this Period 3000 <b>Transaction ID : B-E-6430</b>
City Alexandria	State VA Zip Code 22311	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3670.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 63	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nossaman LLP</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2015
Mailing Address 777 South Figueroa Street 34th Floor		Amount of Each Disbursement this Period 4,500.00 106.25
City Los Angeles	State CA Zip Code 90017	
Purpose of Disbursement Legal Consulting	Category/Type 001	<b>Transaction ID : B-E-6438</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pike County Lincoln Day Dinner</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2015
Mailing Address 2777 Shyville Road		Amount of Each Disbursement this Period 250
City Piketon	State OH Zip Code 45661	
Purpose of Disbursement Program Expense	Category/Type 001	<b>Transaction ID : B-E-6441</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement MM / DD / YYYY 03 / 12 / 2015
Mailing Address 4905 Del Ray Avenue		Amount of Each Disbursement this Period 4,428.15
City Bethesda	State MD Zip Code 20814-2527	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	<b>Transaction ID : B-E-6467</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4784.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 12 / 2015</b>
Mailing Address <b>4905 Del Ray Avenue</b>		Amount of Each Disbursement this Period <b>2000</b>
City <b>Bethesda</b> State <b>MD</b> Zip Code <b>20814-2527</b>	Purpose of Disbursement <b>Compliance Consulting</b>	<b>001</b> Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : B-S-3089</b>
Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(03/12/15)

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 12 / 2015</b>
Mailing Address <b>4905 Del Ray Avenue</b>		Amount of Each Disbursement this Period <b>2000</b>
City <b>Bethesda</b> State <b>MD</b> Zip Code <b>20814-2527</b>	Purpose of Disbursement <b>Compliance Consulting</b>	<b>001</b> Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : B-S-3092</b>
Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(03/12/15)

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 12 / 2015</b>
Mailing Address <b>3610 Hacks Cross Road</b>		Amount of Each Disbursement this Period <b>95.57</b>
City <b>Memphis</b> State <b>TN</b> Zip Code <b>38125</b>	Purpose of Disbursement <b>Express Shipping</b>	<b>001</b> Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>Transaction ID : B-S-3094</b>
Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(03/12/15)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 12 / 2015</b>
Mailing Address <b>4905 Del Ray Avenue</b>		Amount of Each Disbursement this Period <b>125</b>
City <b>Bethesda</b> State <b>MD</b> Zip Code <b>20814-2527</b>	Purpose of Disbursement <b>General Office Supplies</b>	Transaction ID : <b>B-S-3090</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(03/12/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 12 / 2015</b>
Mailing Address <b>4905 Del Ray Avenue</b>		Amount of Each Disbursement this Period <b>20.48</b>
City <b>Bethesda</b> State <b>MD</b> Zip Code <b>20814-2527</b>	Purpose of Disbursement <b>E-Merchant Fees</b>	Transaction ID : <b>B-S-3091</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(03/12/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 12 / 2015</b>
Mailing Address <b>4905 Del Ray Avenue</b>		Amount of Each Disbursement this Period <b>125</b>
City <b>Bethesda</b> State <b>MD</b> Zip Code <b>20814-2527</b>	Purpose of Disbursement <b>General Office Supplies</b>	Transaction ID : <b>B-S-3093</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(03/12/15)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 12 / 2015</b>
Mailing Address <b>4905 Del Ray Avenue</b>		Amount of Each Disbursement this Period <b>62.1</b>
City <b>Bethesda</b> State <b>MD</b> Zip Code <b>20814-2527</b>	Purpose of Disbursement <b>E-Merchant Fees</b>	Transaction ID : <b>B-S-3095</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Campaign Financial Services(03/12/15)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Scioto County Lincoln Day Dinner</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 12 / 2015</b>
Mailing Address <b>1609 Offner Street</b>		Amount of Each Disbursement this Period <b>250</b>
City <b>Portsmouth</b> State <b>OH</b> Zip Code <b>45660</b>	Purpose of Disbursement <b>Program Expense</b>	Transaction ID : <b>B-E-6468</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paycor, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 16 / 2015</b>
Mailing Address <b>644 Linn Street Suite 200</b>		Amount of Each Disbursement this Period <b>40</b>
City <b>Cincinnati</b> State <b>OH</b> Zip Code <b>45203-1734</b>	Purpose of Disbursement <b>Payroll Fees</b>	Transaction ID : <b>B-E-6482</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>290.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 63			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 162 <b>Transaction ID : B-E-6529</b>
City San Francisco	State CA Zip Code 94105	
Purpose of Disbursement E-Merchant Fees	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Lukens Company</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address 2800 Shirlington Road		Amount of Each Disbursement this Period 8347.16 <b>Transaction ID : B-E-6531</b>
City Arlington	State VA Zip Code 22206	
Purpose of Disbursement Direct Mail	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. PNC Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2015
Mailing Address PO Box 856177		Amount of Each Disbursement this Period 1423.39 <b>Transaction ID : B-E-6532</b>
City Louisville	State KY Zip Code 40285	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9932.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 63	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

**A. The Ritz-Carlton Sarasota**

Full Name (Last, First, Middle Initial)  
Mailing Address 1111 Ritz Carlton Drive

City Sarasota State FL Zip Code 34236

Purpose of Disbursement Lodging  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement  /  /

Amount of Each Disbursement this Period

**Transaction ID : B-S-3080**

**[MEMO ITEM]**  
Subitemization of PNC Bank(03/23/15)

**B. Sonoma**

Full Name (Last, First, Middle Initial)  
Mailing Address 223 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Catering  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement  /  /

Amount of Each Disbursement this Period

**Transaction ID : B-S-3083**

**[MEMO ITEM]**  
Subitemization of PNC Bank(03/23/15)

**c. The Ritz-Carlton Sarasota**

Full Name (Last, First, Middle Initial)  
Mailing Address 1111 Ritz Carlton Drive

City Sarasota State FL Zip Code 34236

Purpose of Disbursement Lodging  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement  /  /

Amount of Each Disbursement this Period

**Transaction ID : B-S-3081**

**[MEMO ITEM]**  
Subitemization of PNC Bank(03/23/15)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Acqua AI 2</b>		Date of Disbursement MM / DD / YYYY 03 / 23 / 2015
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 297.45
City Washington State DC Zip Code 20003	Purpose of Disbursement Catering Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3087  [MEMO ITEM] Subitemization of PNC Bank(03/23/15)
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 03 / 23 / 2015
Mailing Address 300 1 St Street SE		Amount of Each Disbursement this Period 76.38
City Washington State DC Zip Code 20003	Purpose of Disbursement Meal Expense Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-S-3086  [MEMO ITEM] Subitemization of PNC Bank(03/23/15)
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Maggie Wuellner</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2015
Mailing Address 3422 Custer Avenue		Amount of Each Disbursement this Period 2500
City Cincinnati State OH Zip Code 45208-2529	Purpose of Disbursement Fundraising Consulting Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : B-E-6534
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 63			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Wenstrup for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mailink</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2015
Mailing Address 701 143rd Avenue NW Suite M		Amount of Each Disbursement this Period 780.98 <b>Transaction ID : B-E-6535</b>
City Ramsey State MN Zip Code 55303	Purpose of Disbursement Postage 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 1.5 <b>Transaction ID : B-E-6551</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement E-Merchant Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 144 2nd Street 1st Floor		Amount of Each Disbursement this Period 162 <b>Transaction ID : B-E-6707</b>
City San Francisco State CA Zip Code 94105	Purpose of Disbursement E-Merchant Fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	944.48
<b>TOTAL</b> This Period (last page this line number only).....	58639.81