FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction		N					0//					
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Exan	nple: If typyin the lines	ng, type	1	2FE4	1M5	Office	e use only	У			_
RENEW OHIO	PAC	1 1 1 1 1 1 1			1 1 1		1 1					<u></u>		لــا
1					111	1 1	1 1	1 1	1	1 1 1		l I	1 1	ıl
ADDRESS (number and	street) 726 \$	SIXTEENTH STRE	EET NE				1 1						Ш	
(Check if addr		SILLON				L	οн	 		4464 4464	6	 48	39	Ш Ш
COMMITTEE E F MA	II ADDDECC		CITY			ST	ATE			ZIP	COD	E 📥		
committee's e-ma rchuff@sssne														. 1
							_ _	_						<u></u>
COMMITTEE'S WEB	PAGE ADDRESS (U	<u> </u>												
1														. 1
								_			!			<u></u>
2. DATE 0.1	M / D D / Y													
3. FEC IDENTIFICA	ATION NUMBER	C	Coo	455576	• • •									
4. IS THIS STATEM	MENT X NEW	/ (N) OR		AMEN	DED (A)									
I certify that I have exam	_	to the best of my know	vledge and	d belief it is tr	ue, correct	and co	mplete							
Signature of Treasurer	, Electronically File	d by Ralph C H u	uff			Dat	e	0 1	/	D 0 8	/ [2	0 [°] 0	9
NOTE: Submission of fa		nplete information may								2 U.S.0	C. S43	7g.		
Office Use Only				For further Federal Electron Toll Free 800	tion Comm 0-424-9530	nission	act:		F	(Revise			1	

FE3AN042.PDF

	FEC	C Form 1 (Revised 12/2007)	Page 2
5.		F COMMITTEE (Check One) ate Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	e candidate
	Name of Candidate		
	Candidate Party Affi		State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	Party Co	ommittee:	
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Political	Action Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
		Corporation Corporation w/o Capital Stock Lab	oor Organization
		Membership Organization Trade Association Co	operative
	(f)	X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	fund or party
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint Fun	ndraising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	С	Committees Participating in Joint Fundraiser	
		1. FEC ID number C	
		2. FEC ID number	
		3 FEC ID number C	
		4 FEC ID number C	
		FEC ID number C	

	FEC Form 1 (Revised 12	² /2007)			Paç	ge 3
W	rite or Type Committee Name					
	RENEW OHIO PAC					
6.	Name of Any Connected Org	ganization, Affiliated Committee,	Leadership PAC Sponsor o	or Joint Fundrais	ing Representat	tive
	Zack Space for Congress	Committee				
1		<u> </u>	<u> </u>			
	Mailing Address	PO Box 266	<u> </u>			
		1			 	
		Dover		[ОН]	44622	0266
		CITY		STATE A	ZIP COD	E 🛦
	Relationship:					
	Connected Organization	Affiliated Committee	X Leadership PAC Spor	nsor Joint	t Fundraising Rep	resentative
	possession of Committee Full Name Mailing Address		itreet NE			
		Massillon		ОН	44646	4839
	Title or Position ▼ Treasurer	CITY A	Telephone nur	STATE A	ZIP COD - <u>833</u> -	DE 4 4234
8.		and address (phone number designated agent (e.g., assist		er of the commi	ttee; and the	
	Full Name of Treasurer Ralph	C Huff				
	Mailing Address	726 Sixteenth S	Street NE			
		Massillon		ОН	44646	4839
	Title or Position ♥	CITY A		STATE	ZIP COL	DE A
	Treasurer		Telephone nu	330 mber	_ 833 _	4234
			i Siopilorio fiui			

FEC Form 1 (Rev	rised 12/2007)		Page 4
Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A
	Teleph	one number	
9. Banks or Other Depos			
Name of Bank, Deposito	maintains funds. ory, etc.	mmittee deposits funds, ho	lds accounts, rents
Name of Bank, Deposito	maintains funds.	mmittee deposits funds, ho	lds accounts, rents
Name of Bank, Deposito	maintains funds. ory, etc. Huntington National Bank	mmittee deposits funds, ho	ı
Name of Bank, Deposito	maintains funds. ory, etc. Huntington National Bank	mmittee deposits funds, ho	ı
Name of Bank, Deposito	maintains funds. ory, etc. Huntington National Bank 232 West Third Street		
Name of Bank, Deposito	maintains funds. ory, etc. Huntington National Bank 232 West Third Street Dover CITY A	OH	44622 _
Name of Bank, Deposito	maintains funds. ory, etc. Huntington National Bank 232 West Third Street Dover CITY A	OH	44622 _
Name of Bank, Deposito	maintains funds. ory, etc. Huntington National Bank 232 West Third Street Dover CITY A	OH STATE 4	44622
Name of Bank, Deposite Mailing Address Name of Bank, Deposite	maintains funds. ory, etc. Huntington National Bank 232 West Third Street Doyer CITY Ory, etc.	OH STATE A	44622
Name of Bank, Deposite Mailing Address Name of Bank, Deposite	maintains funds. ory, etc. Huntington National Bank 232 West Third Street Doyer CITY Ory, etc.	OH STATE A	44622 _