PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Ohio National Financial Services Field Political Action Committee One Financial Way ADDRESS (number and street) (Check if address is changed) Cincinnati 45242 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tyler_parker@ohionational.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 02 2018 C00484089 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Paul, Doris, , , Type or Print Name of Treasurer Paul, Doris,,, [Electronically Filed] 10 02 2018 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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	Form 1 (Revised 02/2009) COMMITTEE	raye Z			
Candid	Candidate 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. (Cominformation below.)	plete the candidate			
Name of Candidate					
Candidate Party Affi	55	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party C	ommittee:				
(d)		(Democratic, Republican, etc.) Party			
Politica	I Action Committee (PAC):				
(e) x		nected organization is			
_	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party			
	In addition, this committee is a Lobbyist/Registrant PAC.				
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint Fu	ndraising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political			
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political			
C	ommittees Participating in Joint Fundraiser				
1.	FEC ID number				
2.	FEC ID number C				
3.	FEC ID number				
4.					

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	FEC Form 1 ((Revised 02/2009)	Page 3
	Vrite or Type Commit		
	_	nal Financial Services Field Political Action Com	mittee
6.	Name of Any Con	nnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
C	Dhio National F	inancial Services Field Political Action Committee	
	Mailing Address	One Financial Way	
	maming ridaress		
		Cincinnati OH 45242	
		CITY STATE ZI	P CODE
		5/11 5/1/12 2/	I OODL
	Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leader	ership PAC Sponsor
	Custodian of Reco	ords: Identify by name, address (phone number optional) and position of the person in posse	ssion of committee
		Paul, Doris, , ,	
	Full Name		
	Mailing Address	One Financial Way	
		Cincinnati OH 45242	
	Title or Position	CITY STATE ZI	P CODE
	PAC Treasurer	, 513 , 79	4 , , 6382 ,
	The Headin	Telephone number	
3.		name and address (phone number optional) of the treasurer of the committee; and the name ent (e.g., assistant treasurer).	and address of
	Full Name F	Paul, Doris, , ,	
	of Treasurer	10. F	
	Mailing Address	One Financial Way	
		Cincinnati OH 45242	
	Title or Position	CITY STATE ZIF	P CODE
	PAC Treasurer	513 79-	4 6382

513 |-|

Telephone number

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Full Name of Designated		
Agent		
Mailing Address		
	CITY	TATE ZIP CODE
Title or Position		
	Telephone number	er
safety deposit boxes or		•
safety deposit boxes or Name of Bank, Deposit	maintains funds.	
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. Bank 425 Walnut Street	
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. Bank	OH 45202
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. Bank 425 Walnut Street Cincinnati	
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. Bank 425 Walnut Street Cincinnati CITY S1	OH 45202
safety deposit boxes or Name of Bank, Deposit US Mailing Address	maintains funds. tory, etc. Bank 425 Walnut Street Cincinnati CITY S1	OH 45202
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safety deposit boxes or Name of Bank, Deposit US Mailing Address Name of Bank, Deposit	maintains funds. tory, etc. Bank 425 Walnut Street Cincinnati CITY S1	OH 45202