1503 - 140 - 2002

FEC

STATEMENT OF **ORGANIZATION**

REVEIVEL
FEDERAL CLECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

FORM 1			ZUIŞ MAR	R 16 PH 12: 08		
NAME OF COMMITTEE (in full)	(Check i	. ,, .,	type 12FE4M5			
CINCINNATUS PAC						
		·				
ADDRESS (number and s	street) [aass w	CIOIURIT SITRE	E ₁ 7, , , , , , , ,			
(Check if add is changed)	ress					
	CITY A	UNATI	STATE A	5 10 1 - 1 0 1 2 ZIP CODE ▲		
COMMITTEE'S E-MAIL	ADDRESS					
(Check if add is changed)	if address [C,I,N,C,I,N,N,A,T,J,S,P,A,C,@,G,M,A,I,L,-,C,O,M, , , , , , , , , , , , , , , , , ,					
	Optional Second	E-Mail Address-				
CCMMITTEE'S WEB PA	• •		The second of th	A AB TONGA DO		
21 0.3	*					
2. DATE 0.3 (11) (2015)						
3. FEC IDENTIFICATION NUMBER ▶ C						
4. IS THIS STATEMEN	NT X NEW (N)	OR AMENDE	D (A)			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.						
Type or Print Name of	Treasurer 5ean	P. Callan	•			
Signature of Treasurer	SPCE		Date 0 3	10 2015		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.						
Office Use Only		For further info Federal Election Toll Free 800-42 Local 202-694-1	4-9530	FEC FORM 1 (Revised 06/2012)		

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<i>_</i>
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FEC	C Form 1 (Revised 02/2009)	Page 2			
	DF COMMITTEE				
Candid	date 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. (Compinformation below.)	lete the candidate			
Name of Candidat					
Candidat Party Aft	75 31 VI PI 35 1E # # #	State District			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	DISTRICT BARRIES			
Name of Candida					
Party (Committee:				
(d)	(National, State	Democratic, Republican, etc.) Party.			
Politic	eal Action Committee (PAC):				
(e) .	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	nected organization is a			
	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.	Соорегануе			
(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party			
	Committee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC.				
	Control Contro				
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	·····			
Joint F	Fundraising Representative:	•			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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			
	Committees Participating in Joint Fundraiser				
	.				
1	1. PEC ID number				
2	2. [] FEC ID number C				
3	3.				
4	4.				

1		
FEC Form 1 (Revised		Page 3
Write or Type Committee Nam	- .	
<u>Cincinn</u> atus	PAC	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NOME		
Mailing Address		
		<u></u>
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Ide books and records. 	ntify by name, address (phone number optional) and position of the perso	n in possession of committee
Full Name SEA	N. P. CALLAN.	
Mailing Address	225 W COURT STREET	
	CINCINNATI DH	45 20 2-110112
Title or Position	CITY STATE	ZIP CODE
TREASURER	Telephone number 5 1	3 -17,21 -15,5,2,5
Treasurer: List the name at any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name of Treasurer	M. P. CALLAN,	· · ·
Mailing Address	225 W. COURT STREET	 - 1
	CITY STATE	4,5,2,0,2)-[1,0,1,2 ZIP CODE
Title or Position		3]-[7, <mark>2,1</mark>]- 5,5,2 <u>5</u>

CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 02/2009)

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225 West Court Street CINCINNATI, OH 45202 MANLEY BURKE, LPA

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Federal Election Commission **ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt USPS First Class Mail Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

(3/2015)

PREPARER