



Form No. OEC-2013
OHIO ETHICS COMMISSION
FINANCIAL DISCLOSURE STATEMENT

13

This statement is to be filed in 2014
 Financial information for calendar year 2013

Please type or print clearly. See instructions for assistance with this page.

SECTION A. PERSONAL CONTACT INFORMATION

Last Name: First Name: MI:

Address: City: State: Zip:

County: E-mail Address: Phone:

SECTION B. STATUS (Check all that apply)

Candidate
 Write-in Candidate
 Elected to an office
 Appointed to an unexpired term in elective office
 Public Official
 Public Employee
 Voluntary Filer

CANDIDATES: Please list the date of the first election (primary, special, or general) when your name will appear on the ballot.

Month	Day	Year
0	5	2014

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FILED
APR 04 2014
 OHIO ETHICS COMMISSION

SECTION C. PUBLIC POSITION, OFFICE, OR JOB

Position/Title (Example: council member, sheriff, board member, or job title): Seeking
 Hold
 Held

Public Entity you serve in 2014, served in 2013, or will serve if elected:

Public Salary: Uncompensated Less than \$16,000 \$16,000 or more

Start Date:

Month	Day	Year
0	1	2011

 End Date:

Month	Day	Year
0	1	2015

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 OHIO ETHICS COMMISSION
 2014 APR - 4 P 4: 07

SECTION D. ADDITIONAL PUBLIC POSITION, OFFICE, OR JOB

Position/Title (Example: council member, sheriff, board member, or job title): Seeking
 Hold
 Held

Public Entity you serve in 2014, served in 2013, or will serve if elected:

Public Salary: Uncompensated Less than \$16,000 \$16,000 or more

Start Date:

Month	Day	Year

 End Date:

Month	Day	Year

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Walk-in Inter Office No Check
 Rev'd by: KRK

Filer has answered every required question.
 Filer has not answered these questions: [Signature]

Date incomplete form returned to filer: _____
 Date completed form returned to OEC: _____

1. SOURCES OF INCOME - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 4)

I have no sources of income that I am required to list.

Source of Income	Service Provided	Amount
A Please see attached list		
B		
C		
D		
E		
F		

2. SOURCES OF GIFTS - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 5)

I have no sources of gifts that I am required to list.

Source of Gift	Source of Gift
A Please see attached list	D
B	E
C	F

3. NAMES OF SPOUSE RESIDING IN HOUSEHOLD AND ANY DEPENDENT CHILDREN - ALL FILERS MUST ANSWER THIS QUESTION:

There are no immediate family members whose names I am required to list.

(For help, see instructions page 5)

Husband/Wife Residing in Household	Dependent Children
Karen Kasich	
Dependent Children	
Emma Kasich	
Reese Kasich	

4. NAMES OF BUSINESSES - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 5)

If you or anyone you listed in Question 3 owns or operates a business, list the name of the business.

There are no business names that I am required to list.

Business Name	Business Name
A CrowdsMatter.com, LLC	C
B	D

5. LAND (REAL ESTATE) IN OHIO - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 6)

I have no real estate that I am required to list.

Land (Real Estate) in Ohio (List address or, if address is unavailable, plat number and county)
A
B
C
You are not required to disclose your personal residence or real property held primarily for personal recreation.

6. CREDITORS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 6)

I have no creditors that I am required to list.

Creditor	Creditor
A American Express Card	D
B Visa Card - Merrill Lynch	E
C	F

7. DEBTORS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 6)

I have no debtors that I am required to list.

Debtor	Debtor
A	C
B	D

8. INVESTMENTS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 6 and 7)

I have no investments that I am required to list.

Corporation, Trust, Business Trust, Partnership, or Association	Nature of Investment
A Please See Attached List	
B	
C	
D	
E	
F	
IF YOU NEED ADDITIONAL SPACE, PLEASE ATTACH A SEPARATE SHEET.	

9. OFFICES/FIDUCIARY RELATIONSHIPS - ALL FILERS MUST ANSWER THIS QUESTION:

(For help, see instructions page 7)

I have no offices or fiduciary relationships that I am required to list.

Corporation, Trust, Business Trust, Partnership, or Association	Office or Nature of Relationship
A Please See Attached List	
B	

SKIP QUESTIONS 10 AND 11 IF YOU ARE A:

- College or university trustee
- Candidate for a city, township, school district, or ESC position that is paid less than \$16,000 a year
- City, township, school district, ESC, or sanitary district official or employee serving in a position that is paid less than \$16,000 a year

10. FOOD OR BEVERAGES - SKIP THIS QUESTION IF LISTED IN BOX ABOVE:

(For help, see instructions page 8)

I have no sources of meals, food, or beverages that I am required to list.

Source of Food or Beverages	Source of Food or Beverages
A State of Ohio	C
B	D

11. TRAVEL EXPENSES - SKIP THIS QUESTION IF LISTED IN BOX ON PAGE 3:

(For help, see instructions page 8)

I have no sources of travel expenses that I am required to list.

Source of Travel Expenses	Amount
A Please See Attached List	
B	
C	
D	
E	
F	

12. NON-DISPUTED INFORMATION - ALL state employees, state officials and state board and commission members (except college and university trustees) are REQUIRED to answer Question 12. All other filers should skip this question and go to question 13.

I have no information that I am required to list.

(For help, see instructions page 9)

Non-Disputed Information
A University of Cincinnati President's Medal of Distinction valued at \$45
B

13. SIGNATURE - ALL FILERS MUST SIGN THE STATEMENT:

(For help, see instructions page 9 and 10)

By signing this statement:

- I swear or affirm that this statement and any additional attachments have been prepared or carefully reviewed by me, and constitute my complete, truthful, and correct disclosure of all required information, and that the address listed on page 1 is a correct mailing address.
- I acknowledge and understand that, among other potential violations and penalties, knowingly filing a false statement is a criminal misdemeanor of the first degree, in violation of Sections 102.02(D) and 2921.13(A)(7) of the Revised Code, punishable by a fine of not more than \$1,000, imprisonment of not more than six months, or both.
- I acknowledge and understand that filing a false statement may be grounds for removal from public office or dismissal from public employment pursuant to Sections 3.04 and 124.34 of the Revised Code.
- I acknowledge that, in 2013, I served in, or in 2014, I am serving in or a candidate for, the position indicated on page 1 of this statement.

If you have any questions before signing this form, please contact the Ohio Ethics Commission at (614) 466-7090.

Before signing this statement, please review to make sure that you have answered each question you are required to answer. If you have nothing to list in response to any question, check the box indicating that you have nothing to list. If the response to any required question is omitted, the Commission will return the statement to you as incomplete. **Any person who fails to file a complete statement by the appropriate filing deadline will be assessed a late filing fee and may be subject to criminal penalty.**

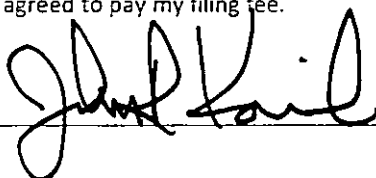
Deliver completed statement to: Ohio Ethics Commission, 30 W. Spring St., L3, Columbus, OH 43215

My filing fee is:

(For help, see instructions page 2)

- Enclosed (check or money order payable to "Ohio Ethics Commission")
- Submitted Online
- My public agency is required or has agreed to pay my filing fee.

YOUR SIGNATURE IS REQUIRED HERE:



Date:

4/3/14

Rev'd 12.30.13

Question 1 -- Source of Income

Source of Income

State of Ohio
Delaware County Bank
Wesbanco Bank Inc.
The Resilience Fund II
Goldfarb & Associates
City of Columbus
Alliance Bernstein Holding LP (investment within Northwestern Mutual, but K-1 issued)
Northwestern Mutual Wealth Management Company (In the name of John Kasich Family Trust)

Service Provided

Salary
Savings, checking and CD interest
Time Deposits
Investments
Book Author (donated to charity)
Income Tax Refund
Investments
Investments

Question 2 -- Source of Gifts

Giver
Republican Governors Association
Ohio Republican Party
Dr. Michael Ports
Dr. Tom Barrett
Governor's Residence Support Foundation
Ron Hartman
JobsOhio *
World Economic Forum
Osborne & Partners
Jack Cera
The New York Republican State Committee

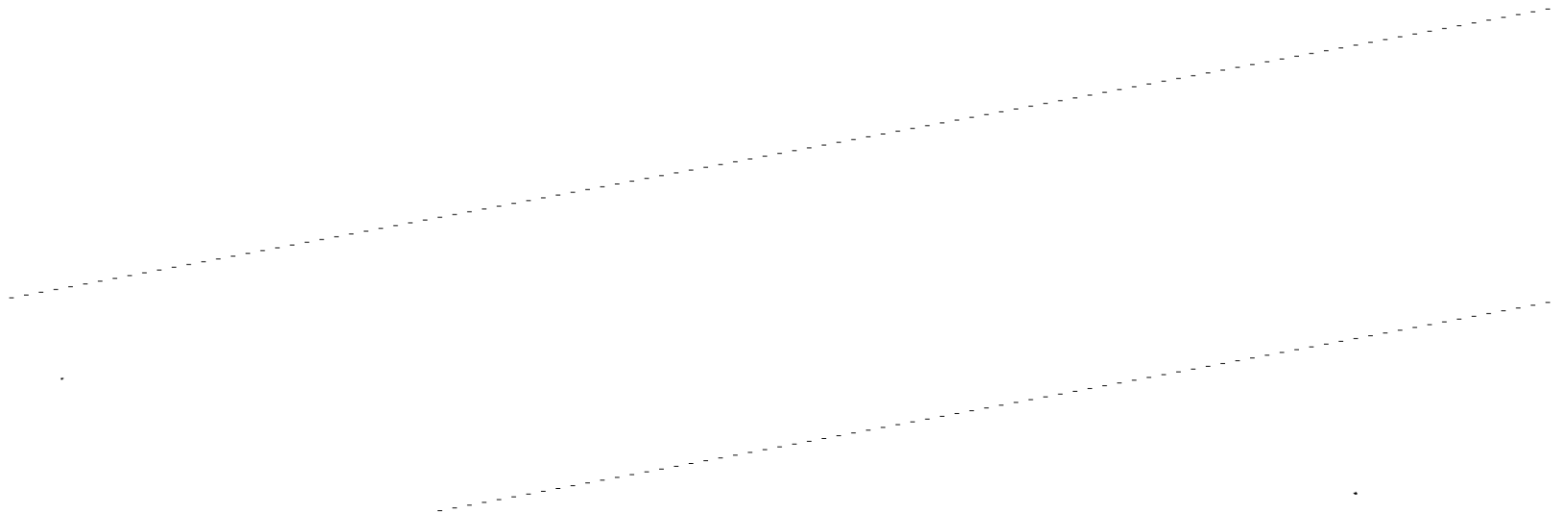
* Actual or in-kind expenditures for the travel, meals or lodging of the Governor pursuant to R.C. 187.03(B), provided by JobsOhio in connection with the Governor's performance of official duties related to JobsOhio

Question 8 -- Investments over \$1000

Corporation, Trust, Business Trust, Partnership, or Associaton	Nature of Investment
Delaware County Bank Checking	Cash-Type Account
Delware County Bank CD	CD
Ovation Florida Bank Investment	Limited Partership
Resilient Corp	Common Stock
Thrift Savings (Funds G and C)	Deferred Comp
General Money Market Fund	Money Market
Alliance Bernstein International Value	Mutual Fund
American Century Diversified Bond	Mutual Fund
Bond Fund of America (A)	Mutual Fund
Bond Fund of America (F1)	Mutual Fund
EuroPacific Growth Fund (A)	Mutual Fund
EuroPacific Growth Fund (F1)	Mutual Fund
Fidelity Advisors Midcap II	Mutual Fund
Franklin Natural Resourced Fund	Mutual Fund
Franklin OH Tax Free Income Fund	Mutual Fund
Goldman Sachs Technology Tollkeeper	Mutual Fund
Investment Company of America (A)	Mutual Fund
New Economy Fund (F1)	Mutual Fund
Nuveen OH Municipal Bond	Mutual Fund
Putnam Global Health Care	Mutual Fund
Putnam US Government Health Care	Mutual Fund
Putnam Voyager Fund	Mutual Fund
Small Cap World Fund (A)	Mutual Fund
Small Cap World Fund (F1)	Mutual Fund
Tax Exempt Bond Fund of Am (A)	Mutual Fund
Tax Exempt Bond Fund of Am (F1)	Mutual Fund
Washington Mutual Investors Fund	Mutual Fund
Deutsche Bank Insured MMF	Money Market
General Municipal Money Market	Money Market
Russell Internation Dev Markets	Mutual Fund
Russell Tax Managed US Large Cap	Mutual Fund
Russell Emerging Markets	Mutual Fund
Russell Global Real Estate Securities	Mutual Fund
Russell Tax Exempt Bond Fund	Mutual Fund
Russell Comodity Strategies	Mutual Fund
Russell US Small Cap Equity	Mutual Fund
Russell Global Equity Fund	Mutual Fund
Russell US Mid Cap Equity	Mutual Fund
Northwestern Mutual - RR Series	Personal Annuity
Northwestern Mutual - SPRA Gold	Personal Annuity
Northwestern Mutual - MM Series	Personal Annuity
Northwestern Mutual - MM Series	SEP IRA
Northwestern Mutual - RR Series VA	Roth IRA
Lehman Brothers Holdings Inc. Retirement Plan (PBGC)	Pension

Ohio PERS
Wesbanco
NMIS General Money Market Fund

Retirement Fund
Checking Account
Money Market Account



Question 11 -- Source of Travel Expense

Source of Travel Expenses	Amount of Travel Expenses
ODOT Aviation	\$143.58
ODOT Aviation	\$121.86
ODOT Aviation	\$366.00
ODOT Aviation	\$197.07
ODOT Aviation	\$152.25
ODOT Aviation	\$359.50
ODOT Aviation	\$219.31
ODOT Aviation	\$146.00
ODOT Aviation	\$127.80
ODOT Aviation	\$159.17
ODOT Aviation	\$162.42
ODOT Aviation	\$161.71
ODOT Aviation	\$148.25
ODOT Aviation	\$102.83
ODOT Aviation	\$183.00
ODOT Aviation	\$148.92
ODOT Aviation	\$169.14
ODOT Aviation	\$213.83
ODOT Aviation	\$190.90
ODOT Aviation	\$164.40
ODOT Aviation	\$124.58
ODOT Aviation	\$171.70
Governor's Office	\$196.53