✓ No

Yes

Ohio Campaign Finance Reportois oct 20 AM II: 17

LIRAMILIA COUNTY Prescribed by Secretary of State 3/05 Full Name of Committee Registration Number, if PACT 1UP 5 Good Health Columbus Political Action Committee Full Name of Candidate Street Address Office Sought 1390 Dublin Road Zip Code **Columbus** 43215 O 2015 X Pre-General Annual Year Type of Report Pre-Primary Post-Primary Post-General (place X to the left of report July September August Semiannual Monthly Monthly Monthly type) Termination Amended Report? Report Electronically filed? Y

Date of Election

3

5

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

✓ No

Yes

	15
Amount brought forward from last report	9,413.45
2. Total monetary contributions (From Form No. 31-A)	5,050.00
3. Total other income (From Form No. 31-Á-2)	\$ 0.00
4. Total funds available (sum of lines 1, 2, 3)	\$ 14,463.45
5. Total monetary expenditures (From Form No. 31-B)	\$ 4,100.00
6. Balance on hand (line 4 minus line 5)	\$ 10,363.45
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$
Outstanding loans owed by committee (From Form No. 31-C)	, \$
10. Outstanding debts owed by committee (From Form No. 31-N)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	\$
12. Value of independent expenditures made (From Form No. 31-U)	\$
13. For Electronic Filing Entities only Sum of lines 2, 7 and amount of any new loans received this period	\$

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER											
COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE PIETH DEGREE / / //											
Philip H. Cass, Dep. Treasurer Pully HCoss							10/20/2015				
Print Name and Title (Treasurer and Deputy Treasurer only) Signature								Date			
Contribution			Expenditure			Other		Γ	Total		ĺ
pages	1		pages	1		pages	7		pages	9	ĺ
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