Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

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Full Name of Committee	rai	nklin C	oun.	ty Gre	en P	arty 1.7	PARTIES	Registra		Near, if F	PAC
Full Name of Candidate	I/A						R1 0F	FLEC	HOIT	S	
Street Address 1021 E. Broad St. Office Soughi					Office Sought	V/A			District N/A		
Columbus								State Zip Code 43205		a05	
Type of Report		Pre-Primary		Post-Primary		Pre-General		Post-Ge	neral		Annual Year
(place X to the left of report type)		July Monthly		August Monthly		September Monthly		Termina	tion	×	Semiannual 2016
Amended Report? Yes	& No	Report Electronically	Filed?	□Yes 128 No	Date of I	election N/A	,	4	Ē		Y

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 \square No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

I. Amount brought forward from last report	s	112	37
2. Total monetary contributions (From Form No. 31-A)	s	109	00
3. Total other income (From Form No. 31-A-2)	s	0	00
4. Total funds available (sum of lines 1, 2, 3)	s	221	37
5. Total monetary expenditures (From Form No. 31-B)	s	8	00
6. Balance on hand (line 4 minus line 5)	s	213	37
7. Value of in-kind contributions received (From Form No. 31-J-1)	s	55	00
8. Value of in-kind contributions made (From Form No. 31-J-2)	s		
9. Outstanding loans owed by committee (From Form No. 31-C)	s		
10. Outstanding debts owed by committee (From Form No. 31-N)	s		
11. Outstanding loans owed to committee (From Form No. 31-K)	s		
12. Value of independent expenditures made (From Form No. 31-U)	s		-
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	s		-

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THE INFORMATION CONTAINED IN THIS REPORT IS MADE I FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEC SUZONNE M. Patzer, Treasurer	GREE.	ON FALSIFICATION, WHOEV	VER COMMITS ELECTION $7/29/16$
Print Name and Title (Treasurer and Deputy Treasurer only)	Signature	-	Date
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