Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee								Registr	ation Nur	nber, if I	PAC	. 17	
Dr. Brad Lewis for Coroner Committee									Copility				
Brad Lewis													
Street Address 14 East Gay St., 2nd Floor Office Sought County Corone								District Franklin Co				n Co	
City Columbus							Sta OH	State Zip Coo		13215			
Type of Report (place X to the left of report type)		Pre-Primary	Post-Primary		W	Pre-General		Post-General		Annual Year			
		July Monthly		rugust Ionthly		September Monthly	21	Termin	ation		Semiann	ual	
Amended Report? 🔲 Yes	⊡ No	No Report Electronically Filed? Yes No Date					1 ^M	1	0	2	0	^Y 4	
For candidates only, during an e No other forms are required for	a post-pr	imary or post-general pe	riod, if abov	ve statement applies	00 or less du s. See R.C. 35	17.10(H) for deta	pre- and post-perionils.		e election	, check l	эох 🗓		
	Amount brought forward from last report Total monetary contributions (From Form No. 31-A)					\$ 	\$3,325	ļ:	\dashv				
	3. Total other income (From Form No. 31-A-2)					\$	\$0	.00					
	4. Total funds available (sum of lines 1, 2, 3)					\$	\$7,164	.34					
	5. Total monetary expenditures (From Form No. 31-B)					\$	\$3,090	.00					
	6. Balance on hand (line 4 minus line 5) 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)					\$	\$4,074	.34					
						\$	\$0	.00	_				
						\$	\$C	.00					
	9. Outstanding loans owed by committee (From Form No. 31-C) 10. Outstanding debts owed by committee (From Form No. 31-N)						\$0	.00	_				
							\$3,422	<u> </u>					
11. Outstanding loans owed to committee (From Form No. 31-K)						\$	\$0	.00	_				
	12. Value of independent expenditures made (From Form No. 31-U)						\$0	.00					
		r Electronic Filing Ent um of lines 2, 7, and am		new loans receive	d this period	\$	<u></u>						
THE INFORMATION CONTA FALSIFICATION IS GUILTY	OF A F	ELONY OF THE FIF		CE.	_	CTION FALSIF	ICATION. WHOE	VER C	OMMITS	ELEC	FION		
Bradley K. Sinnott, Treasurer Print Name and Title (Treasurer and Deputy Treasurer only) Signature									01/2	5/07			
THE Name and Title (Treasurer a	ыв Юери	ny rreasurer only)		Signature					Date				
Contribution 5		Expenditur	re 1			Other 1			[Total	7		