School Control Control

Ohio Campaign Finance Report

09 DEC 11 AND 11:36

Prescribed by Secretary of State 3/05 FRANKLIN CT NOT BOARD OF ELLIPTIONS

Full Name of Committee	Name of Committee Registration Number, if PAC						.C		
Ashenhurst for Hi	Iliard City Cou	ncil							
Full Name of Candidate								***************************************	
James O. Ashenhu	ırst								
Street Address	Address Office Sought					District			
			City Cou	ıncil Hilliard			liard		
City			State			Zip Code			
Hilliard			-						
Type of Report	Pre-Primary	Post-Primary	Pre-	General	×	Post-Gei	neral		Annual Year
(place X to the left of report	July	August	Sept	tember					Semiannual
type)	Monthly	Monthly	Mor	nthly	Termination				
Amended Report? ☐ Yes ☑ No	a ·	ronically filed? Yes	Date of Electi	ion	1	M 1	0	3	0 9

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.

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THE INFORMATION CONTAINED IN THIS	REPORT IS MADE UNDER THE PENAL	LIT OF ELECTION FALSIFICATION, WHO	EVER
COMMITS ELECTION FALSIFICATION IS	GUILTY OF A FELONY OF/THE FIFTH	DEGREE	
Susan M Bogan	<u>V(6</u> 00	LL TMOGGAN	12-9-09
Print Name and Title (Treasurer and Deputy Treasu	rer only) Signature		Date
Contribution	Expenditure	Other	Total
pages 1	pages 1	pages 1	pages 3