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FILED

Ohio Campaign Finance Report 29 AM 9:20

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY
BOARD OF ELECTIONS

Full Name of Committee Citizens for Alicia Healy		Registration Number, if PAC	
Full Name of Candidate Alicia B. Healy			
Street Address 721 Bulen Ave.		Office Sought City Council	District Columbus
City Columbus		State OH	Zip Code 43205
Type of Report (place X to the left of report type)	Pre-Primary	Post-Primary	Pre-General
	July	August	September
	Monthly	Monthly	Monthly
Amended Report?	Report Electronically filed?		Annual Year
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		110309

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.

1. Amount brought forward from last report	\$ 517.57
2. Total monetary contributions (From Form No. 31-A)	\$ 215.00
3. Total other income (From Form No. 31-A-2)	\$ —
4. Total funds available (sum of lines 1, 2, 3)	\$ 732.57
5. Total monetary expenditures (From Form No. 31-B)	\$ 500.00
6. Balance on hand (line 4 minus line 5)	\$ 232.57
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)	\$ —
9. 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 FIFTH DEGREE

Debra S. Hurtt Treasurer **Debra S. Hurtt** Signature **10-28-09** Date

Contribution
pages **1**

Expenditure
pages **1**

Other
pages **1**

Total
pages **3**