

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee Franklin County Libertarian Party		Registration Number, if PAC 28	
Full Name of Candidate			
Street Address 3200 Rockport Bridge Dr. E.		Office Sought	District
City Columbus		State OH	Zip Code 43221
Type of Report (place X to the left of report type)	Pre-Primary July Monthly	Post-Primary August Monthly	Pre-General September Monthly
			Post-General Termination
			Annual Year 2015
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of Election		M	D

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 for 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	\$	6012	04
2. Total monetary contributions (From Form No. 31-A)	\$	903	28
3. Total other income (From Form No. 31-A-2)	\$	0	12
4. Total funds available (sum of lines 1, 2, 3)	\$	1915	44
5. Total monetary expenditures (From Form No. 31-B)	\$	347	07
6. Balance on hand (line 4 minus line 5)	\$	1,568	37
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	0	
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	0	
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	0	
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	0	
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	0	
12. Value of independent expenditures made (From Form No. 31-U)	\$	0	
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.

Christopher Gill
Print Name and Title (Treasurer and Deputy Treasurer only)

[Signature]
Signature

1/28/16
Date

Contribution
pages **2**

Expenditure
pages **1**

Other
pages **1**

Total
pages **4**