Ohio Campaign Finance Report

-	Prescribed by Secretary of State 3/05						5 A.P.P.	21	ÁN H	: Va	
Full Name of Committee FRANKLIN COU	JNTY DEMOCRA	ATIC PART	Y-CAMPA	AIGN	I ACCOUNT	BC.	Registrati	on Numb	· FDA	C ' .1	
. Warre of Caracan										#15	
Street Address 929 HARRISON A	AVE SUITE 100				Office Sought				District		
City COLUMBUS					1	State Zip			Code 43215		
Type of Report (place X to the left of report type)	Pre-Primary	Pre-Primary Post-Primary			Pre-General September	Post-General			<u> </u>	Annual Year Semiannual	
	Monthly	Monthly		ليا	Monthly		Terminati	on.	<u> </u>	V	
Amended Report? Tes	No Report Electronically	Filed? 🖸 Yes (No U	Date of	Election	0 "	5	0 Ӌ	5	1 5	
For candidates only, during an el No other forms are required for a	dection year: if total contribution a post-primary or post-general p	is and expenditures e eriod, if above states	ach total \$500 or le neut applies. See R	ess durin .C. 3517	g the combined pre- and 7.10(H) for details.	l post-perio	ods at one o	election,	check be	ox □	
	1. Amount brought forward	l from last report			s	\$5,570	.19]			
	3. Total other income (From Form No. 31-A-2) 4. Total funds available (sum of lines 1, 2, 3) 5. Total monetary expenditures (From Form No. 31-B) 6. Balance on hand (line 4 minus line 5)				s \$	82,690	.39				
					\$	\$80	.00				
					s \$	88,340	.58				
					s \$	82,991					
					s	\$5,348.70					
					s	\$150	.00]			
	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	m Form No. 31-K)	,	s						
	12. Value of independent expenditures made (From Form No. 31-U)										
	13. For Electronic Filing Ea Sum of lines 2, 7, and a		oans received this	period.	s			_			
THE INFORMATION CONT. FALSIFICATION IS GUILTY	AINED IN THIS REPORT IS OF A FELONY OF THE FI		HE PENALTY OF	ELEC	TION FALSIFICATIO	on, whoi	EVER CO	MMITS	ELECT	TION	
Kimberly E. Mari			interly (/	Yours			4-2	0-/5	<u>. </u>	
Print Name and Title (Treasurer	and Deputy Treasurer only)	Signat	nure 0		(` Date	•		
Contribution 2	Expendi	ture o]	О	ther (a)	7		<u> </u>	Total	o4	