Full Name of Committee

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

| Full Name of Committee | | | | | - | | | Registra | ation Nur | nber, if | PAC |) | |
|--|---|--|--------------------|---|---|---|-------------------|--------------|------------------------|--------------|------------|--------------|--|
| Franklin County Democratic Party - JUDICIAL ACCOUNT | | | | | | | | | ROARD OF ELECTIONS | | | | |
| Full Name of Candidate | | | | | | | | | 10 O | EL | ECTIO | NS | |
| | | | | | | | | | | | | | |
| Street Address | Office Sought | District | | | | | | | | | | | |
| 271 E. State Stree | | | | | | | | | | | | | |
| City | | Sta | te | Zip Co | de | | | | | | | | |
| Columbus | OH | | 43215 | | | | | | | | | | |
| Type of Report (place X to the left of report type) | Pre-Primary | | | Post-Primary | | Pre-General | | Post-General | | Annual Year | | | |
| | _ | July | + | August Monthly | | September Monthly | <u>'</u> | Fost-General | | - | Semiannual | | |
| | 1 | Monthly | | | 11. | | | Termina | | 1. | | | |
| Amended Report? Yes No Report Electronically Filed? Yes No Date of Election | | | | | | | | 1 | 0 | 6 | 0 | 7 7 | |
| Essentidates substitution of | 4: | | | I deco | | | | | | | | <u> </u> | |
| For candidates only, during an el No other forms are required for a | ection ye post-pri | ear: if total contribution imary or post-general pe | s and experiod, if | penditures each total \$500 above statement applies. | 0 or less dur See R.C. 35 | ing the combined pro 17.10(H) for details. | e- and post-perio | ds at one | e election | i, check | box ⊔ | | |
| | | | | | | | | , | | | | | |
| | 1. Amount brought forward from last report | | | | | \$ | \$1,509 | .68 | i | | | | |
| | A TAMOUNT DIVUGAL INTERAL HOM MIST TEPUT | | | | | | <u> </u> | | - | | | | |
| | 2. Total monetary contributions (From Form No. 31-A) | | | | | \$ | \$38,796 | .00 | | | | | |
| | | | | | | | | | | | | | |
| | 3. Total other income (From Form No. 31-A-2) | | | | | \$ | | ŀ | | | | | |
| | 4. Total funds available (sum of lines 1, 2, 3) | | | | | \$ | \$40,305 | .68 | | | | | |
| | 5. Total monetary expenditures (From Form No. 31-B) | | | | | \$ | \$18,623 | .86 | | | | | |
| | 6. Balance on hand (line 4 minus line 5) | | | | | \$ | \$21,681 | .82 | | | | | |
| | 7. Value of in-kind contributions received (From Form No. 31-J-1) | | | | | \$ | | | 7 | | | | |
| | 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) | | | | | \$ | | | | | | | |
| | | r Electronic Filing En um of lines 2, 7, and an | \$ | | | | | | | | | | |
| THE INFORMATION CONTAFALSIFICATION IS GUILTY Kimberly E. Marin Print Name and Title (Treasurer a | OF A F | elony of the fif , Treasurer | | GREE. | 1 - | Marin L | ATION. WHOE | VER CO | OMMIT /0-/9 Date | S ELEC | CTION | | |
| Contribution 3 | | Expendite pag | | 2 | i | Other 3 | | | | Total pages_ | 8 | | |