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Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee CITIZENS FOR CARRIER						Registration Number, if PAC		
Full Name of Candidate FRANK LESLIE CARRIER, JR								
Street Address 4394 SHIRE CREEK CT					Office Sought HILLIARD CITY COUN		District	
City HILLIARD					State O H		Zip Code 43026	
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General	
	July		August		September		Termination	
	Monthly		Monthly		Monthly		Monthly	
Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No			Report Electronically filed? <input type="checkbox"/> Yes <input type="checkbox"/> No			Date of Election		
						M		D
								Y

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	\$	1,033.53
2. Total monetary contributions (From Form No. 31-A)	\$	
3. Total other income (From Form No. 31-A-2)	\$	
4. Total funds available (sum of lines 1, 2, 3)	\$	1,033.53
5. Total monetary expenditures (From Form No. 31-B)	\$	30.00
6. Balance on hand (line 4 minus line 5)	\$	1,003.53
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	\$	

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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 FIRST DEGREE.

Katherine Williard Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

Katherine Williard

Signature

1/21/15

Date

Contribution pages	<u>0</u>
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Expenditure pages	<u>1</u>
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Other pages	<u>0</u>
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Total pages	<u>1</u>
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