Ohio Campaign Finance Report

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_			F	Prescribed by Secret	ary of State 3	3/05		()9 0 0	T 2	2 PM	2: 1	
Full Name of Committee Friends of Gwe	n Cal	lender							tion Nun FRA ∩ A.D.	MAL	N 00	UNIX	
Full Name of Candidate Gwen Callender	•								UAIY	U Ur	tt	U HU f	
Street Address 8772 Crampton Drive						Office Sought Dublin School Board				District			
City Powell					Stați OH				 dode 43065				
Type of Report (place X to the left of report type)	Pre-Primary Post-Primary					Pre-General	Post-Ge		neral	al Annual Year			
	200000000000000000000000000000000000000	July Monthly	August Monthly		9000000	September Monthly	(100-00-20-00-00-00-00-00-00-00-00-00-00-0	Termina	tion	Semiar		oval	
Amended Report? 🗓 Yes	™ No	Report Electronically F	Filed? 🔲 Y	es 🖺 No	Date of	Election	1 M	1	0	3	0	9	
For candidates only, during an e No other forms are required for										•			
	1. Amount brought forward from last report					\$	0.00						
	2. Total monetary contributions (From Form No. 31-A)					\$ \$2,615.00							
	3. Total other income (From Form No. 31-A-2)					s \$0.00							
	4. Total funds available (sum of lines 1, 2, 3)				\$ \$2,615.00								
	5. Total monetary expenditures (From Form No. 31-B)				s \$1,678.92								
	6. Balance on hand (line 4 minus line 5)					s \$936.08							
	7. Value of in-kind contributions received (From Form No. 31-J-1)					\$ \$0.00 \$ \$0.00							
	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)												
					I-C)	s \$0.00							
					\$ \$0.00								
	11. Outstanding loans owed to committee (From Form No. 31-K)				s \$0.00								
	12. Value of independent expenditures made (From Form No. 31-U)				\$ \$0.00								
		r Electronic Filing Ent m of lines 2, 7, and an		new loans received	this period.	\$							
THE INFORMATION CONT FALSIFICATION IS GUILTY LISA J. Brooks, T	OF A FI	ELONY OF THE FIF	MADE UNDE TH DEGREE	R THE PENALTY	OFFLEC	TION FALSIFICATION	. WНОЕ		' оммітя 10/19/				
Print Name and Title (Treasurer			S	ignature	o · (N	<u> </u>			Date		***************************************		
					Γ		1		Г				
Contribution 4		Expenditu	ire 1		Ot	her				Total	5		