## 11 JUL 20 PH 2: 16

## FRANKLIN COUNTY BOARD OF ELECTIONS

## Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee							Registrat	ion Numb	er, if PA	C	
Perry Township	Home Rul	e Commi	ttee								
Full Name of Candidate											
Street Address				Office Sought				District			
150 E. Campus Vic	w Blvd., S	uite 100									
City					State Zip Code						
Columbus						0	l H	432	235		
Type of Report	Pre-Primary		Post-Primary		Pre-General		Post-General			Annual Year	
(place X to the left of report	July		August	1	September	1				Semian	ınual
type)	Monthly		Monthly	1	Monthly		Termination			X	
Amended Report?		Report Electronically filed?			** ** ** ** ** ** ** ** ** ** ** ** **		M		D Y		
				Date of	Election	1	1	0	1	1	1

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(1) for details.

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1. Amount brought forward from last report	0.00
Total monetary contributions (From Form No. 31-A)	4,950.00
3. Total other income (From Form No. 31-A-2)	. \$
4. Total funds available (sum of lines 1, 2, 3)	\$ 4,950.00
5. Total monetary expenditures (From Form No. 31-B)	\$ 3,359.29
6. Balance on hand (line 4 nunus line 5)	\$ 1,590.71
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$ 381.70
	\$ 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)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	0.00
Value of independent expenditures made (From Form No. 31-U) For Electronic Filing Entities only	0.00
Sum of lines 2, 7 and amount of any new loans received this period	

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THE INFORMATION CONTAINED IN				N. WHOEVER		
COMMITS ELECTION FALSIFICATIO		DNY OF THE FIFTH DEG	REE O D S	z 7-18-11		
Daniel P. Lacey, Treasurer						
Print Name and Title (Treasurer and Deputy	Treasurer only)	Signature		Date		
Contribution	Expenditure		Other	Total		
pages 1	pages	1	pages 1	pages 3		
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