

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

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10 JUL 29 PM 2:24

Full Name of Committee Support Your Bexley Library		Registration Number, if PAC COUNTY BOARD OF ELECTIONS	
Full Name of Candidate			
Street Address 2590 Maryland Ave.		Office Sought	District
City BEXLEY		State OH	Zip Code 43209
Type of Report (place X to the left of report type)	Pre-Primary	Post-Primary	Pre-General
	July Monthly	August Monthly	September Monthly
		Termination	X Semiannual
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of Election		1 M 1 D 3 0 Y 9	

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 for 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	\$	303	28
2. Total monetary contributions (From Form No. 31-A)	\$	0	00
3. Total other income (From Form No. 31-A-2)	\$	0	00
4. Total funds available (sum of lines 1, 2, 3)	\$	303	28
5. Total monetary expenditures (From Form No. 31-B)	\$	0	00
6. Balance on hand (line 4 minus line 5)	\$	303	28
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	0	00
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	0	00
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	0	00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	0	00
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	0	00
12. Value of independent expenditures made (From Form No. 31-U)	\$	0	00
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$		

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 FIFTH DEGREE.

Samuel H. Shamansky
Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

7-28-10

Contribution
pages _____

Expenditure
pages _____

Other
pages _____

Total
pages _____