

FILED

# Ohio Campaign Finance Report

OCT 27 PM 2: 05

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY  
BOARD OF ELECTIONS

|                                                                                        |                                      |                                                                                                     |                                                 |                                             |             |                             |  |
|----------------------------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|-------------|-----------------------------|--|
| Full Name of Committee<br><b>Ben Kessler for Bexley City Council</b>                   |                                      |                                                                                                     |                                                 |                                             |             | Registration Number, if PAC |  |
| Full Name of Candidate<br><b>Benjamin James Kessler</b>                                |                                      |                                                                                                     |                                                 |                                             |             |                             |  |
| Street Address<br><b>175 S Stanwood Rd</b>                                             |                                      |                                                                                                     |                                                 | Office Sought<br><b>Bexley City Council</b> |             | District<br><b>Bexley</b>   |  |
| City<br><b>Bexley</b>                                                                  |                                      |                                                                                                     |                                                 | State<br><b>OH</b>                          |             | Zip Code<br><b>43209</b>    |  |
| Type of Report<br>(place X to the left of report type)                                 | <input type="checkbox"/> Pre-Primary | <input type="checkbox"/> Post-Primary                                                               | <input checked="" type="checkbox"/> Pre-General | <input type="checkbox"/> Post-General       | Annual Year |                             |  |
|                                                                                        | <input type="checkbox"/> July        | <input type="checkbox"/> August                                                                     | <input type="checkbox"/> September              | <input type="checkbox"/> Termination        | Semiannual  |                             |  |
|                                                                                        | <input type="checkbox"/> Monthly     | <input type="checkbox"/> Monthly                                                                    | <input type="checkbox"/> Monthly                |                                             |             |                             |  |
| Amended Report?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                      | Report Electronically filed?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                                 | Date of Election                            |             | M D Y<br>1 1 0 8 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(H) for details.

|                                                                     |             |
|---------------------------------------------------------------------|-------------|
| 1. Amount brought forward from last report                          | \$ 140.39   |
| 2. Total monetary contributions (From Form No. 31-A)                | \$ 1,605.00 |
| 3. Total other income (From Form No. 31-A-2)                        | \$ 425.00   |
| 4. Total funds available (sum of lines 1, 2, 3)                     | \$ 2,170.39 |
| 5. Total monetary expenditures (From Form No. 31-B)                 | \$ 56.69    |
| 6. Balance on hand (line 4 minus line 5)                            | \$ 2,113.70 |
| 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)       | \$ 9.78     |
| 9. Outstanding loans owed by committee (From Form No. 31-C)         | \$          |
| 10. Outstanding debts owed by committee (From Form No. 31-N)        | \$ 1,504.26 |
| 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 |             |

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 D. Koon, Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

Contribution  
pages 3

Expenditure  
pages 1

Other  
pages 4

Total  
pages 8

10/25/11