Ohio Campaign Finance Report FILED

- M	Prescribed by Secretary of State 3/05 2015 DEC 11 PM											43		
PALMISCIANO FOR GRANDVIEW Registration Number, 16 PACE TO THE PALMISCIANO FOR GRANDVIEW ROARD OF ELECTIONS.														
Full Name of Candidate MELISSA DUN	MELISSA DUNLAP PALMISCIANO													
Street Address 1376 WYANDOTTE RD							Office Sought GRANDVIEW HEIGHTS SCHOOL BOA				District			
COLUMBUS							State Z OH			Zip Coc	p Code 43212			
Type of Report (place X to the left of report	Pre-Pri	Pre-Primary Post-Primary Pr						Post-General			Annual Year Semiannual			
(ype)	1	Monthly Monthly No Report Electronically Filed? To Yes No				Monthly		 M		Ť		Seman,		
Amended Report?	□ No Report	Electronically F	iled? 🔽 Yes	□ No	Date of	Election		1 "	1	0	3	1	5	
For candidates only, during an No other forms are required for	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 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 b	s 245			52									
	2. Total mone	` '	\$	130 .00										
	3. Total other income (From Form No. 31-A-2)							0						
	4. Total funds available (sum of lines 1, 2, 3)						375	\$0	90 5,	Z				
	5. Total monetary expenditures (From Form No. 31-B)							0]				
	6. Balance on	• •	\$	3°	15	.52								
	7. Value of in-	-I) S	\$	(13	.08								
	8. Value of in-		\$											
	9. Outstandin	,	š											
	10. Outstandi	v) :	5											
	11. Outstandi	<u> </u>												
	12. Value of in	i												
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period. \$														
THE INFORMATION CONT. FALSIFICATION IS GUILTY	AINED IN THIS OF A FELONY	REPORT IS M	ADE UNDER T H DEGREE.	HE PENALTY O	F ELECT	ION FALSIFI	CATION.	WHOE	VER CON	4MITS	ELECT	TON		
MELISSA D. PALMISO	CIANO, TRE	ASURER		lissa 01	Un	iscian	O		12	/11/:	2015	I		
Print Name and Title (Treasurer	and Deputy Treas	urer only)	Signa	ture						Date				
Contribution 1		Expenditure pages	1 3]	Oth	- 1					Fotal pages_	3		