Contribution

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Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

										2015					
1 ALIVIDOIANO I DIX DIXANDVILAV										Registration Number, if PAC					
Full Name of Candidate MELISSA DUNLAP PALMISCIANO										OARD OF ELECTION					
Street Address Office Sought 1376 WYANDOTTE RD GRANDVIEW HTS BOARD OF											District	GRANDVIEW HEIGHTS			
COLUMBUS								Sta OH	State DH		Zip Code 43212				
Type of Report (place X to the left of report type)		Pre-Primary		Post-Primary			Pre-General		Post-General			Annual Year			
		July Monthly	August Monthly		September Monthly				Termination			Semian	nual		
Amended Report? 🗖 Yes	□No	Report Electronically F	iled?	□ Yes □ No	Date	of E	Election	1 ^M	1	0	3	1	Š 5		
For candidates only, during an No other forms are required for								post-perio	ods at one	election	ı, check t	юх 🗆			
	1. Amount brought forward from last report						s 37	52							
Total monetary contributions (From Form No. 31-A) Total other Income (From Form No. 31-A-2)						4	\$	\$0	.00	_					
							\$	\$0	.00						
	4. Total funds available (sum of lines 1, 2, 3) 5. Total monetary expenditures (From Form No. 31-B)						s 37.5	5 -\$0	00 ⁵	36					
							\$	\$ C	.00						
	6. Balance on hand (line 4 minus line 5)						s 37	52							
	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. Outstanding loans owed by committee (From Form No. 31-C) 10. Outstanding debts awed by committee (From Form No. 31-N) 11. Outstanding loans owed to committee (From Form No. 31-K) 12. Value of independent expenditures made (From Form No. 31-U)						\$	\$0	.00						
							\$.00							
							\$0		.00						
							\$.00							
							s	\$0	.00						
							\$	\$0	00						
	13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period														
THE INFORMATION CON FALSIFICATION IS GUILD					OF ELF	ЕСТ	TION FALSIFICATION	i. WHOI	EVER C	омміт	S ELEC	TION			
MELISSA D. PALMIS			· a ix byc.	4	Pa) Museisa	0	C	1/31	/201	7			
Print Name and Title (Treasur	er and De	puty Treasurer only)		Signature	- 40	T				Date					

Other

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Expenditure

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