

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

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Full Name of Committee Citizens for Julia L. Dorrian						Registration Number, if RACI COUNTY BOARD OF ELECTIONS			
Full Name of Candidate Julia L. Dorrian									
Street Address c/o Rosemary Ebner Pomeroy, 500 W. Wilson Bridge Rd., Ste.						Office Sought municipal judge		District	
City Worthington						State O	H	Zip Code 43085	
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General		Annual Year
	July		August		September		Termination		Semiannual
	Monthly		Monthly		Monthly		Termination		2007
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	M	D	Y

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	\$	199.73
2. Total monetary contributions (From Form No. 31-A)	\$	1,000.00
3. Total other income (From Form No. 31-A-2)	\$	
4. Total funds available (sum of lines 1, 2, 3)	\$	1,199.73
5. Total monetary expenditures (From Form No. 31-B)	\$	1,038.00
6. Balance on hand (line 4 minus line 5)	\$	161.73
7. Value of in-kind contributions received (From Form No. 31-A-1)	\$	
8. Value of in-kind contributions made (From Form No. 31-B-2)	\$	
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	
10. Outstanding debts owed by committee (From Form No. 31-D)	\$	
11. Outstanding loans owed to committee (From Form No. 31-E)	\$	
12. Value of independent expenditures made (From Form No. 31-F)	\$	
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

Rosemary Ebner Pomeroy Rosemary E. Pomeroy 6-25-07
Print Name and Title (Treasurer and Deputy Treasurer only) Signature Date

Contribution pages 1

Expenditure pages 1

Other pages 6

Total pages 8

Statement of Expenditures

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Name of Committee in Full Citizens for Julia L. Dorrian												
To Whom Paid National City Bank						M	D	Y	Amount			
						1	2	2	9	0	6	8.00
Address P. O. Box 5756				Purpose service charges								
City Cleveland		State O H		Zip Code 44101		Check Number						
To Whom Paid National City Bank						M	D	Y	Amount			
						0	1	3	1	0	7	8.00
Address P. O. Box 5756				Purpose service charges								
City Cleveland		State O H		Zip Code 44101		Check Number						
To Whom Paid National City Bank						M	D	Y	Amount			
						0	2	2	8	0	7	8.00
Address P. O. Box 5756				Purpose service charges								
City Cleveland		State O H		Zip Code 44101		Check Number						
To Whom Paid National City Bank						M	D	Y	Amount			
						0	3	3	0	0	7	8.00
Address P. O. Box 5756				Purpose service charges								
City Cleveland		State O H		Zip Code 44101		Check Number						
To Whom Paid National City Bank						M	D	Y	Amount			
						0	4	3	0	0	7	3.00
Address P. O. Box 5756				Purpose service charges								
City Cleveland		State O H		Zip Code 44101		Check Number						
To Whom Paid Friends of Ginther, c/o Robert O'Shaughnessy, Treasurer						M	D	Y	Amount			
						0	4	0	2	0	7	1,000.00
Address 405 E. Town St.				Purpose campaign contribution								
City Columbus		State O H		Zip Code 43215		Check Number 1094						
To Whom Paid National City Bank						M	D	Y	Amount			
						0	5	3	1	0	7	3.00
Address P. O. Box 5756				Purpose service charges								
City Cleveland		State O H		Zip Code 44101		Check Number						
To Whom Paid						M	D	Y	Amount			
Address												
City												
State												
Zip Code												
Check Number												

Statement of Contributions Received

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Name of Committee in Full Citizens for Julia L. Dorrian							
Full Name of Contributor Julia L. Dorrian					Registration Number, if PAC		
Street Address 130 Northridge Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43214	M 0 3	D 2 7	Y 0 7	Amount 1,000.00
Full Name of Contributor					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount
Full Name of Contributor					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount
Full Name of Contributor					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount
Full Name of Contributor					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount
Full Name of Contributor					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount
Full Name of Contributor					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount
Full Name of Contributor					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount
Full Name of Contributor					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]