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FRANKLIN COUNTY
BOARD OF ELECTIONS

Ohio Campaign Finance Report

Prescribed by Secretary of State §95

Full Name of Committee Rita Eppler for Judge					Registration Number, if PAC	
Street Address 941 Robbins Way					District	
City Worthington, Ohio					State	Zip Code 43085
Type of Report (place X to the left of report type)	Pre-Primary July Monthly	Post-Primary August Monthly	Pre-General September Monthly	Post-General Termination	Annual Year	
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					Date of Election 11 08 94	

Office Sought (Candidates only) Courthouse Judge
 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
 If other forms are required at a post-primary or post-general period, it above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$	
2. Total monetary contributions (From Form No. 31-A)	\$	
3. Total other income (From Form No. 31-A-2)	\$	
4. Total funds available (sum of lines 1, 2, 3)	\$	
5. Total monetary expenditures (From Form No. 31-B)	\$	
6. Balance on hand (Line 4 minus line 5)	\$	
Value of in-kind contributions received (From Form No. 31-J-1)	\$	
Value of in-kind contributions made (From Form No. 31-J-2)	\$	
Outstanding loans owed by committee (From Form No. 31-C)	\$	5,000 00
Outstanding debts owed by committee (From Form No. 31-N)	\$	
Outstanding loans owed to committee (From Form No. 31-K)	\$	0
Value of independent expenditures made (From Form No. 31-L)	\$	

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. THE PENALTY FOR ELECTION FALSIFICATION IS IMPRISONMENT FOR NOT MORE THAN SIX MONTHS, OR A FINE OF NOT MORE THAN \$1,000, OR BOTH.

Rita S. Eppler
 Print Name and Title (Treasurer and Deputy Treasurer only)

[Signature]
 Signature

1/25/07
 Date

Contribution pages _____

Expenditure pages _____

Other pages _____

Total pages 2

Statement of Loans Received

Prescribed by Secretary of State 895

Full Name of Contributor <u>Rita Foyler for Judge</u>									
From Whom Received <u>Rita Foyler</u>					Prior Amount <u>\$,000</u>		Amt. Incurred this Period <u>0</u>		
Address <u>941 Rabkins Way</u>					Outstanding Balance <u>\$,000</u>				
City <u>Worthington</u>		State <u>OH</u>	Zip Code <u>43045</u>						
Date Loan was originally incurred					M		Date		Amount
					M	D	Y	\$	
Registration Number, if PAC					M	D	Y		
Employer/Occupation/Labor Organization*					M	D	Y		
From Whom Received					Prior Amount		Amt. Incurred this Period		
Address					Outstanding Balance				
City		State	Zip Code						
Date Loan was originally incurred					M		Date		Amount
					M	D	Y	\$	
Registration Number, if PAC					M	D	Y		
Employer/Occupation/Labor Organization*					M	D	Y		
From Whom Received					Prior Amount		Amt. Incurred this Period		
Address					Outstanding Balance				
City		State	Zip Code						
Date Loan was originally incurred					M		Date		Amount
					M	D	Y	\$	
Registration Number, if PAC					M	D	Y		
Employer/Occupation/Labor Organization*					M	D	Y		

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation rather than employer should be listed. If two or more employers donate via payroll deduction and exceed an aggregate of \$100, the labor organization of which the employees are members, if any, must appear. R.C. 3317.10(B)(4)

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 11-A-2). Transfers of all payments made in this period to the Statement of Expenditures (Form No. 11-B). Transfer Total Outstanding Balance to the cover page.

Total Payments this Period \$ 0 (also record on Form 11-B)

Total Outstanding Balance \$ 5,000 (also record on cover page)