

FILED

Ohio Campaign Finance Report

06 OCT 26 PM 3:36

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY
BOARD OF ELECTIONS
Registration Number, if PAC

Full Name of Committee Friends of Marilyn Brown							Registration Number, if PAC			
Full Name of Candidate Marilyn Brown										
Street Address 34 W. Polar Ave #205						Office Sought County Commissioner		District		
City Columbus						State Oh	Zip Code 43215			
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		X Pre-General		Post-General		Annual Year	
	July Monthly		August Monthly		September Monthly		Termination		Semiannual	
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 1	D 1	Y 0 7 0 6

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	\$ 104,612.90
2. Total monetary contributions (From Form No. 31-A)	\$ 41,271.57
3. Total other income (From Form No. 31-A-2)	\$ 83,000.00
4. Total funds available (sum of lines 1, 2, 3)	\$ 228,884.47
5. Total monetary expenditures (From Form No. 31-B)	\$ 178,497.59
6. Balance on hand (line 4 minus line 5)	\$ 50,386.88
7. Value of in-kind contributions received (From Form No. 31-I-1)	\$ 1,416.00
8. Value of in-kind contributions made (From Form No. 31-I-2)	\$
9. Outstanding loans owed by committee (From Form No. 31-C)	\$ 83,150.00
10. Outstanding debts owed 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)	\$
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.

William H. Woods Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

10/26/06
Date

Contribution pages 38

Expenditure pages 5

Other pages 4

Total pages 47

Statement of Contributions Received

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Name of Committee in Full Friends of Marilyn Brown							
Full Name of Contributor Rick J. Schieterman					Registration Number, if PAC		
Street Address 8546 Preston Mill Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0 6	D 1 0	Y 0 6	Amount 50.00	
Full Name of Contributor Stuart Benis					Registration Number, if PAC		
Street Address 326 S. High St. Suite 300		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43125	M 0 6	D 1 1	Y 0 6	Amount 100.00	
Full Name of Contributor Al R. Bordelon					Registration Number, if PAC		
Street Address 3958 Fairlington Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 0 6	D 1 2	Y 0 6	Amount 50.00	
Full Name of Contributor Patrick J. Gannon					Registration Number, if PAC		
Street Address 15 Spring Creek Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Ck		
City Westerville	State O H	Zip Code 43081	M 0 6	D 1 4	Y 0 6	Amount 50.00	
Full Name of Contributor Joseph C. Grimes					Registration Number, if PAC		
Street Address 4758 A Middletowne St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Ck		
City Columbus	State O H	Zip Code 43214	M 0 6	D 1 5	Y 0 6	Amount 25.00	
Full Name of Contributor Shirley F. Block					Registration Number, if PAC		
Street Address 5860 NW 44th St. #501		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Ck		
City Lauderhill	State F L	Zip Code 33319	M 0 6	D 1 6	Y 0 6	Amount 25.00	
Full Name of Contributor Randy J. Fortener					Registration Number, if PAC		
Street Address 8229 Milhouse Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Ck		
City Dublin	State O H	Zip Code 43016	M 0 6	D 1 7	Y 0 6	Amount 200.00	
Full Name of Contributor Daniel F. Trevas					Registration Number, if PAC		
Street Address 216 S. James Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Ck		
City Columbus	State O H	Zip Code 43213	M 0 6	D 2 1	Y 0 6	Amount 25.00	

* 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)]

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Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor Bernice Silverstein							
Street Address 1198 Ranchland Dr.					Form (Cash, Check, etc.) Ck		
City Mayfield Hts.	State O H	Zip Code 44124	M 0 5	D 1 3	Y 0 6	Amount 20.00	
Full Name of Contributor Carpenters Local Union #200 PCE, Entity #10288							
Street Address 1545 Alum Creek Dr.					Form (Cash, Check, etc.) Ck		
City Columbus	State O H	Zip Code 43209	M 0 6	D 2 0	Y 0 6	Amount 2,000.00	
Full Name of Contributor Walter J. Gerhardstein Jr.							
Street Address 7100 N. High St., Suite 307					Form (Cash, Check, etc.) Ck		
City Worthington	State O H	Zip Code 43085	M 0 6	D 3 0	Y 0 6	Amount 100.00	
Full Name of Contributor Donna K. Laidlaw							
Street Address 265 S. Parkview Ave.					Form (Cash, Check, etc.) Ck		
City Columbus	State O H	Zip Code 43209	M 0 7	D 0 5	Y 0 6	Amount 100.00	
Full Name of Contributor Sheryl Williams							
Street Address 658 Bugle Ct.					Form (Cash, Check, etc.) Ck		
City Gahanna	State O H	Zip Code 43230	M 0 7	D 0 5	Y 0 6	Amount 25.00	
Full Name of Contributor John E. Snyder							
Street Address 794 S. 6th					Form (Cash, Check, etc.) Ck		
City Columbus	State O H	Zip Code 43206	M 0 7	D 1 0	Y 0 6	Amount 50.00	
Full Name of Contributor Jane L. Miller							
Street Address 1198 Sanctuary Place					Form (Cash, Check, etc.) Ck		
City Gahanna	State O H	Zip Code 43230	M 0 7	D 0 7	Y 0 6	Amount 50.00	

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Name of Committee in Full Friends of Marilyn Brown							
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 Vorys Sater Seymour and Pease LLP					Registration Number, if PAC OH109		
Street Address 52 E. Gay St., P.O. Box 1008		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Ck		
City Columbus	State O h	Zip Code 43215	M 0 7	D 2 5	Y 0 6	Amount 500.00	
Full Name of Contributor Teresa m. Bierdeman					Registration Number, if PAC		
Street Address 1333 Doten Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Columbus	State O h	Zip Code 43212	M 0 7	D 1 5	Y 0 6	Amount 100.00	
Full Name of Contributor I.B.E.W.-C.OP.E.					Registration Number, if PAC		
Street Address 900 Seventh St. NW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Washington	State D C	Zip Code 20001	M 0 8	D 0 1	Y 0 6	Amount 1,500.00	
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 Nancy A Fuerst					Registration Number, if PAC		
Street Address 2916 Fairmount Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Cleveland Hts	State O h	Zip Code 44118	M 0 8	D 1 9	Y 0 6	Amount 100.00	
Full Name of Contributor Ruth Ellen Palmer					Registration Number, if PAC		
Street Address 3004 Pleasantville Rd., Nw., Rt. 2		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Carroll	State O h	Zip Code 43112	M 0 8	D 0 7	Y 0 6	Amount 100.00	
Full Name of Contributor William L. Shelby					Registration Number, if PAC		
Street Address 4975 Condit Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Sunbury	State O h	Zip Code 43074	M 0 7	D 3 1	Y 0 6	Amount 250.00	

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