

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

FILED
07 OCT 25 PM 3:44
FRANKLIN COUNTY
BOARD OF ELECTIONS

Full Name of Committee Friends for Paul Bingle							Registration Number, if PAC					
Full Name of Candidate Paul D Bingle												
Street Address 408 E Schreyer Pl					Office Sought City Council Member			District Columbus				
City Columbus							State O	H	Zip Code 43214			
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		X Pre-General		Post-General		Annual Year			
	July		August		September		Termination		Semiannual			
	Monthly		Monthly		Monthly		Termination					
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		
							1	1	0	6	0	7

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	\$	0.00
2. Total monetary contributions (From Form No. 31-A)	\$	5,675.00
3. Total other income (From Form No. 31-A-2)	\$	6,500.00
4. Total funds available (sum of lines 1, 2, 3)	\$	12,175.00
5. Total monetary expenditures (From Form No. 31-B)	\$	9,164.28
6. Balance on hand (line 4 minus line 5)	\$	3,010.72
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	3,247.49 / 2,897.49 LP
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 owed by committee (From Form No. 31-N)	\$	2,427.70 / 2,247.49 LP
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.

LINDA PAUL, TREASURER

Paul Bingle
Signature

10/25/07
Date

Contribution pages 10

Expenditure pages 22

Other pages 913

Total pages 4146

Statement of Contributions Received

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Name of Committee in Full Friends for Paul Bingle									
Full Name of Contributor Don DeSoto					Registration Number, if PAC				
Street Address 1415 Newbrook Dr, #110			Employer/Occupation/Labor Organization* Americas Charities			Form (Cash, Check, etc.) Cash			
City Chantilly		State V A		Zip Code 20151		M 0	D 2	Y 07	Amount 40.00
Full Name of Contributor Paul Bingle					Registration Number, if PAC				
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check			
City Columbus		State O H		Zip Code 43214		M 0	D 2	Y 28	Amount 100.00
Full Name of Contributor Dorothy Teater					Registration Number, if PAC				
Street Address 3272 Cleeve Hill			Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check			
City Columbus		State O H		Zip Code 43017		M 0	D 3	Y 08	Amount 100.00
Full Name of Contributor Paul Bingle					Registration Number, if PAC				
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check			
City Columbus		State O H		Zip Code 43214		M 0	D 3	Y 24	Amount 50.00
Full Name of Contributor Linda Paul					Registration Number, if PAC				
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check			
City Columbus		State O H		Zip Code 43214		M 0	D 3	Y 25	Amount 30.00
Full Name of Contributor Paul Bingle					Registration Number, if PAC				
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check			
City Columbus		State O H		Zip Code 43214		M 0	D 4	Y 02	Amount 50.00
Full Name of Contributor Linda Paul					Registration Number, if PAC				
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check			
City Columbus		State O H		Zip Code 43214		M 0	D 4	Y 25	Amount 130.00
Full Name of Contributor Franklin County Forum					Registration Number, if PAC				
Street Address 6681 Markwood St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State O H		Zip Code 43085		M 0	D 4	Y 27	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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Name of Committee in Full Friends for Paul Bingle									
Full Name of Contributor Paul Bingle						Registration Number, if PAC			
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43214		M D Y 0 4 3 0 0 7		Amount 100.00	
Full Name of Contributor Paul Bingle						Registration Number, if PAC			
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43214		M D Y 0 5 1 6 0 7		Amount 50.00	
Full Name of Contributor Paul Bingle						Registration Number, if PAC			
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43214		M D Y 0 5 3 1 0 7		Amount 50.00	
Full Name of Contributor Linda Paul						Registration Number, if PAC			
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43214		M D Y 0 5 3 1 0 7		Amount 30.00	
Full Name of Contributor Paul Bingle						Registration Number, if PAC			
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43214		M D Y 0 6 1 5 0 7		Amount 50.00	
Full Name of Contributor Paul Bingle						Registration Number, if PAC			
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43214		M D Y 0 6 2 9 0 7		Amount 50.00	
Full Name of Contributor Linda Paul						Registration Number, if PAC			
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43214		M D Y 0 6 3 1 0 7		Amount 30.00	
Full Name of Contributor Linda Paul						Registration Number, if PAC			
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43214		M D Y 0 7 0 5 0 7		Amount 30.00	

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Name of Committee in Full Friends for Paul Bingle							
Full Name of Contributor Susan Barrett					Registration Number, if PAC		
Street Address 3949 Wynding Dr			Employer/Occupation/Labor Organization* Dublin Montessori			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43214	M 0 7	D 2 6	Y 0 7	Amount 100.00
Full Name of Contributor Paul Bingle					Registration Number, if PAC		
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43214	M 0 8	D 0 1	Y 0 7	Amount 100.00
Full Name of Contributor Linda Paul					Registration Number, if PAC		
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43214	M 0 8	D 0 7	Y 0 7	Amount 30.00
Full Name of Contributor Byrl Shoemaker					Registration Number, if PAC		
Street Address 92 Ceramic Dr			Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43214	M 0 8	D 1 2	Y 0 7	Amount 10.00
Full Name of Contributor Robert Reuter					Registration Number, if PAC		
Street Address 14430 Indian Creek			Employer/Occupation/Labor Organization* Dylon Manufacturing			Form (Cash, Check, etc.) Check	
City Independence		State O H	Zip Code 44130	M 0 8	D 2 2	Y 0 7	Amount 100.00
Full Name of Contributor Roberta Paul					Registration Number, if PAC		
Street Address 2461 Dover Center Rd			Employer/Occupation/Labor Organization* Pioneer Mfg			Form (Cash, Check, etc.) Check	
City Westlake		State O H	Zip Code 44145	M 0 8	D 2 3	Y 0 7	Amount 25.00
Full Name of Contributor Heidi Paul					Registration Number, if PAC		
Street Address 1055 Nicholson Ave			Employer/Occupation/Labor Organization* Magnificat High School			Form (Cash, Check, etc.) Check	
City Lakewood		State O H	Zip Code 44107	M 0 8	D 2 6	Y 0 7	Amount 100.00
Full Name of Contributor Paul Bingle					Registration Number, if PAC		
Street Address 408 E Schreyer Pl			Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43214	M 0 8	D 2 8	Y 0 7	Amount 100.00

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Name of Committee in Full Friends for Paul Bingle						
Full Name of Contributor Sandra Morrow				Registration Number, if PAC		
Street Address 718 N Elmwood		Employer/Occupation/Labor Organization* Self Employed			Form (Cash, Check, etc.) Check	
City Oak Park	State I L	Zip Code 60302	M 0 8	D 3 1	Y 0 7	Amount 50.00
Full Name of Contributor Susan Southwick Good				Registration Number, if PAC		
Street Address 3100 N High St		Employer/Occupation/Labor Organization* Southwick Good Funeral Home			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43202	M 0 8	D 3 1	Y 0 7	Amount 100.00
Full Name of Contributor Timothy Crawley				Registration Number, if PAC		
Street Address 100 W Weisheimer		Employer/Occupation/Labor Organization* Timothy Crawley Atty			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43214	M 0 9	D 0 8	Y 0 7	Amount 25.00
Full Name of Contributor Martha Trout				Registration Number, if PAC		
Street Address 4399 Colerain Ave		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43214	M 0 9	D 1 4	Y 0 7	Amount 100.00
Full Name of Contributor Marilyn Pramschufer				Registration Number, if PAC		
Street Address 235 W Kenworth		Employer/Occupation/Labor Organization* Columbus State Community college			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43214	M 0 9	D 2 2	Y 0 7	Amount 50.00
Full Name of Contributor Reminger & Reminger				Registration Number, if PAC CP495		
Street Address 1400 Midland Bdlg., 101 Prospect Ave		Employer/Occupation/Labor Organization* Law Firm			Form (Cash, Check, etc.) Check	
City Cleveland	State O H	Zip Code 44116	M 1 0	D 0 1	Y 0 7	Amount 250.00
Full Name of Contributor Paul Bingle				Registration Number, if PAC		
Street Address 408 E Schreyer Pl		Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43214	M 1 0	D 0 1	Y 0 7	Amount 100.00
Full Name of Contributor Mary Jane Knapp				Registration Number, if PAC		
Street Address 482 E Schreyer Pl		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43214	M 1 0	D 0 1	Y 0 7	Amount 100.00

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Name of Committee in Full Friends for Paul Bingle							
Full Name of Contributor James Logsdon					Registration Number, if PAC		
Street Address 175 W Weisheimer		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 1 0	D 0 1	Y 0 7	Amount 50.00	
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 Matina Ross					Registration Number, if PAC		
Street Address 465 Springs Dr		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 1 0	D 0 2	Y 0 7	Amount 100.00	
Full Name of Contributor Linda Paul					Registration Number, if PAC		
Street Address 408 E Schreyer Pl		Employer/Occupation/Labor Organization* Earth Share of Ohio			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 1 0	D 0 4	Y 0 7	Amount 30.00	
Full Name of Contributor Anthony Missmi					Registration Number, if PAC		
Street Address 414 E North Broadway		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 1 0	D 0 6	Y 0 7	Amount 25.00	
Full Name of Contributor T Roland Sams					Registration Number, if PAC		
Street Address 138 Jana -K Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43207	M 1 0	D 1 3	Y 0 7	Amount 200.00	
Full Name of Contributor Citizens for Kevin Bacon					Registration Number, if PAC		
Street Address 5325 Ponderosa Dr		Employer/Occupation/Labor Organization* State of Ohio			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43231	M 1 0	D 1 5	Y 0 7	Amount 50.00	
Full Name of Contributor Michael O'Sullivan					Registration Number, if PAC		
Street Address 4229 Gavin Ln		Employer/Occupation/Labor Organization* Wallner Financial			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 0	D 1 5	Y 0 7	Amount 25.00	

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