

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <i>Friends of Dr. Jan Gorwaniak</i>						Registration Number, if PAC					
Full Name of Candidate <i>Dr. Jan Gorwaniak</i>											
Street Address <i>7374 Claddagh Lane</i>				Office Sought <i>Coroner</i>		District					
City <i>Dublin</i>				State <i>OH</i>	Zip Code <i>43016</i>						
Type of Report (place X to the left of report type)	<input type="checkbox"/>	Pre-Primary	<input checked="" type="checkbox"/>	Post-Primary	<input type="checkbox"/>	Pre-General	<input type="checkbox"/>	Post-General	<input type="checkbox"/>	Annual Year	
	<input type="checkbox"/>	July Monthly	<input type="checkbox"/>	August Monthly	<input type="checkbox"/>	September Monthly	<input type="checkbox"/>	Termination	<input type="checkbox"/>	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	D	Y	
									<i>11</i>	<i>04</i>	<i>08</i>

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 for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

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FRANKLIN COUNTY
BOARD OF ELECTIONS

1. Amount brought forward from last report	\$	<i>1600</i>	<i>00</i>
2. Total monetary contributions (From Form No. 31-A)	\$	<i>305</i>	<i>00</i>
3. Total other income (From Form No. 31-A-2)	\$	<i>0</i>	<i>00</i>
4. Total funds available (sum of lines 1, 2, 3)	\$	<i>1905</i>	<i>\$0-00-00</i>
5. Total monetary expenditures (From Form No. 31-B)	\$	<i>132</i>	<i>70</i>
6. Balance on hand (line 4 minus line 5)	\$	<i>1772</i>	<i>30</i>
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 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.

Randy Gorwaniak, Treasurer
Print Name and Title (Treasurer and Deputy Treasurer only) Signature

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7/5/08

Contribution pages 1

Expenditure pages 1

Other pages _____

Total pages 2

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Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
FRIENDS OF DR JAN CORNIAK ELECTIONS				Check	
Full Name of Contributor Raymond D. + Janet A. Miller		Registration Number, if PAC			
Street Address 390 Charlescarn Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City Powell		State OH	Zip Code 43065	M D Y 02 15 08	Amount 50.00
Full Name of Contributor David + Patricia Metlesitz		Registration Number, if PAC			
Street Address 1400 Mae Pa Trail		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City PARMA		State OH	Zip Code 44134	M D Y 02 17 08	Amount 25.00
Full Name of Contributor Valerie Wilson		Registration Number, if PAC			
Street Address 182 17th Avenue		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City PATERSON		State OH/NJ	Zip Code 07504	M D Y 02 20 08	Amount 25.00
Full Name of Contributor Aisha Wilson		Registration Number, if PAC			
Street Address 103 Westervelt Place		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City Lodi		State OH/NJ	Zip Code 07644	M D Y 02 20 08	Amount 20.00
Full Name of Contributor Joseph + Lisa McKinley		Registration Number, if PAC			
Street Address 3111 Alshire Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City Dublin		State OH	Zip Code 43017	M D Y 02 22 08	Amount 100.00
Full Name of Contributor Robert + Inka Major		Registration Number, if PAC			
Street Address 7333 Claddagh Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City Dublin		State OH	Zip Code 43016	M D Y 02 22 08	Amount 50.00
Full Name of Contributor Ann DeVaughn		Registration Number, if PAC			
Street Address 900 Grand Concourse Apt 16N		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City BRONX		State OH/NY	Zip Code 10451	M D Y 02 25 08	Amount 35.00
Full Name of Contributor		Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City		State OH	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 also appear. [R.C. 3517.10(B)(4)]

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Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of Bill Aronson Gorniak						
To Whom Paid BOARD OF ELECTIONS Giant Eagle			M	D	Y	Amount
			0	2	2	87.51
Address 1000 E. Dublin - Granville		Purpose Stamps: Envelopes				
City Columbus	State OH	Zip Code	Check Number			
To Whom Paid Kinkos			M	D	Y	Amount
			0	2	1	45.19
Address 940 High Street		Purpose				
City Worthington	State OH	Zip Code 43065	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State OH	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State OH	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State OH	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State OH	Zip Code	Check Number			
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City	State OH	Zip Code	Check Number			

132.70
Page Total ~~\$0.00~~