

FILED

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

09 JAN 29 AM 11:44
FRANKLIN COUNTY
BOARD OF ELECTIONS

| | | | | | | | | | | |
|---|-----------------|--|--|--|--------------------------------------|------------------|-----------------------------|-----------------------------|-------------------------|---|
| Full Name of Committee Terry Boyd for School Board | | | | | | | Registration Number, if PAC | | | |
| Full Name of Candidate | | | | | | | | | | |
| Street Address 191 W. Nationwide Blvd., Suite 300 | | | | | Office Sought School Board | | | District Columbus | | |
| City Columbus | | | | | State O H | | Zip Code 43215 | | | |
| Type of Report (place X to the left of report type) | Pre-Primary | | Post-Primary | | Pre-General | | Post-General | | Annual Year | |
| | July Monthly | | August Monthly | | September Monthly | | Termination | | X 2008 | |
| Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | Report Electronically filed? <input type="checkbox"/> Yes <input 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 | \$ | 4,969.85 |
| 2. Total monetary contributions (From Form No. 31-A) | \$ | 0.00 |
| 3. Total other income (From Form No. 31-A-2) | \$ | 0.00 |
| 4. Total funds available (sum of lines 1, 2, 3) | \$ | 4,969.85 |
| 5. Total monetary expenditures (From Form No. 31-B) | \$ | 3,000.00 |
| 6. Balance on hand (line 4 minus line 5) | \$ | 1,969.85 |
| 7. Value of in-kind contributions received (From Form No. 31-J-1) | \$ | 0.00 |
| 8. Value of in-kind contributions made (From Form No. 31-J-2) | \$ | 0.00 |
| 9. Outstanding loans owed by committee (From Form No. 31-C) | \$ | 0.00 |
| 10. Outstanding debts owed by committee (From Form No. 31-N) | \$ | 0.00 |
| 11. Outstanding loans owed to committee (From Form No. 31-K) | \$ | 0.00 |
| 12. Value of independent expenditures made (From Form No. 31-U) | \$ | 0.00 |
| 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.

Donald B. Leach, Jr.

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

1/29/09

Contribution pages 0

Expenditure pages 1

Other pages 4

Total pages 5

Statement of Expenditures

Prescribed by Secretary of State 2/01

| | | | | | | | | | | | | |
|---|--|--|--|---|--|-----------------------------|---|---|--------|---|---|----------|
| Name of Committee in Full Terry Boyd for School Board | | | | | | | | | | | | |
| To Whom Paid Citizens for Strong Schools | | | | | | M | D | Y | Amount | | | |
| | | | | | | 1 | 0 | 2 | 3 | 0 | 8 | 2,500.00 |
| Address 191 W. Nationwide Blvd., Ste. 300 | | | | Purpose Contribution | | | | | | | | |
| City Columbus | | State <input type="radio"/> O <input type="radio"/> H | | Zip Code 43215 | | Check Number 2030 | | | | | | |
| To Whom Paid Faith Ministries | | | | | | M | D | Y | Amount | | | |
| | | | | | | 1 | 1 | 0 | 4 | 0 | 8 | 500.00 |
| Address 2747 Agler Road | | | | Purpose Charitable Contribution | | | | | | | | |
| City Columbus | | State <input type="radio"/> O <input type="radio"/> H | | Zip Code 43224 | | Check Number 2031 | | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount | | | |
| | | | | | | | | | | | | |
| Address | | | | Purpose | | | | | | | | |
| City | | State | | Zip Code | | Check Number | | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount | | | |
| | | | | | | | | | | | | |
| Address | | | | Purpose | | | | | | | | |
| City | | State | | Zip Code | | Check Number | | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount | | | |
| | | | | | | | | | | | | |
| Address | | | | Purpose | | | | | | | | |
| City | | State | | Zip Code | | Check Number | | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount | | | |
| | | | | | | | | | | | | |
| Address | | | | Purpose | | | | | | | | |
| City | | State | | Zip Code | | Check Number | | | | | | |
| To Whom Paid | | | | | | M | D | Y | Amount | | | |
| | | | | | | | | | | | | |
| Address | | | | Purpose | | | | | | | | |
| City | | State | | Zip Code | | Check Number | | | | | | |