

FILED

Ohio Campaign Finance Report

08 DEC 10 PM 1:22

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY
BOARD OF ELECTIONS

Full Name of Committee Vote 4 R Kids							Registration Number, if PAC				
Full Name of Candidate											
Street Address 7244 East Main Street						Office Sought			District		
City Reynoldsburg						State O H		Zip Code 43068			
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		2008 Semiannual		
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 1 1	D 0 4	Y 0 8

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	\$	18,520.43
2. Total monetary contributions (From Form No. 31-A)	\$	2,050.00
3. Total other income (From Form No. 31-A-2)	\$	
4. Total funds available (sum of lines 1, 2, 3)	\$	20,570.43
5. Total monetary expenditures (From Form No. 31-B)	\$	7,965.66
6. Balance on hand (line 4 minus line 5)	\$	12,604.77
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

Thomas V. Dickerson _____ *Thomas V. Dickerson* _____ 12/10/2008
Print Name and Title (Treasurer and Deputy Treasurer only) Signature Date

Contribution
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Expenditure
pages 2

Other
pages 13

Total
pages 16

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Vote 4 R Kids						
Full Name of Contributor Reynoldsburg Support Association				Registration Number, if PAC		
Street Address 6550 Rocky Den		Employer/Occupation/Labor Organization* Labor			Form (Cash, Check, etc.) Check	
City Reynoldsburg Support Association	State O H	Zip Code 43068	M 0 9	D 0 9	Y 0 8	Amount 500.00
Full Name of Contributor Reynoldsburg Education Association				Registration Number, if PAC		
Street Address 7935 Slate Ridge Road		Employer/Occupation/Labor Organization* Labor			Form (Cash, Check, etc.) Check	
City Reynoldsburg	State O H	Zip Code 43068	M 0 9	D 2 8	Y 0 8	Amount 1,500.00
Full Name of Contributor Stephen D. Dackin				Registration Number, if PAC		
Street Address 8733 Taylor Woods Drive		Employer/Occupation/Labor Organization* Occupation			Form (Cash, Check, etc.) Check	
City Reynoldsburg	State O H	Zip Code 43068	M 1 0	D 2 7	Y 0 8	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				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				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				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				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	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 appear. [R.C. 3517.10(B)(4)]

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Vote 4 R Kids									
To Whom Paid Gordon Food Service						M	D	Y	Amount
						0	9	0	191.38
Address Internet Ordering System			Purpose Food						
City		State	Zip Code	Check Number					
				1086					
To Whom Paid All American Trophy						M	D	Y	Amount
						0	9	0	53.38
Address 3055 Templeton Road, Suite M			Purpose Trophy						
City		State	Zip Code	Check Number					
Columbus		O H	43209	1087					
To Whom Paid Reynoldsburg Band Boosters						M	D	Y	Amount
						0	9	0	108.00
Address P.O. Box 249			Purpose Water						
City		State	Zip Code	Check Number					
Reynoldsburg		O H	43068	1088					
To Whom Paid Fairfield Promotions						M	D	Y	Amount
						1	0	0	2,637.00
Address 836 N. Columbus St.			Purpose Yard Signs						
City		State	Zip Code	Check Number					
Lancaster		O H	43130	1089					
To Whom Paid Allegra Print & Imaging						M	D	Y	Amount
						1	0	0	971.05
Address 4279 East Main Street			Purpose Post Cards						
City		State	Zip Code	Check Number					
Columbus		O H	43213						
To Whom Paid This Week Newspaper						M	D	Y	Amount
						1	0	0	924.10
Address			Purpose Advertising						
City		State	Zip Code	Check Number					
Reynoldsburg		O h	43068	1091					
To Whom Paid Eastside Messenger						M	D	Y	Amount
						1	0	0	167.80
Address			Purpose Advertising						
City		State	Zip Code	Check Number					
Reynoldsburg		O H	43068	1092					
To Whom Paid Allegra Print & Imaging						M	D	Y	Amount
						1	0	0	2,063.15
Address 4279 East Main Street			Purpose Mailers						
City		State	Zip Code	Check Number					
Columbus		O H	43213	1093					

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Vote 4 R Kids												
To Whom Paid Ronald A Strussion						M	D	Y	Amount			
						1	0	2	8	0	8	849.80
Address 1730 Graham Road				Purpose Door Hangers								
City Reynoldsburg		State O H		Zip Code 43068		Check Number 1094						
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						
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			