

FILED

Ohio Campaign Finance Report

APR 12 PM 3:33

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY

Full Name of Committee Citizens for Lori M. Tyack						Registration Number, if PAC		
Full Name of Candidate Lori M. Tyack								
Street Address 4080 Chelsea Bridge Lane					Office Sought Municipal Court Clerk		District	
City Gahanna					State O	Zip Code H 43230		
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General	
	July	August	September	Termination	X	Annual Year 2009		
Monthly	Monthly	Monthly						
Amended Report? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Date of Election		M 1
						D 1	Y 0	
							8	
							0	
							5	

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	\$ 13,171.52
2. Total monetary contributions (From Form No. 31-A)	\$ 6,425.00
3. Total other income (From Form No. 31-A-2)	\$
4. Total funds available (sum of lines 1, 2, 3)	\$ 19,596.52
5. Total monetary expenditures (From Form No. 31-B)	\$ 5,624.95
6. Balance on hand (line 4 minus line 5)	\$ 13,971.57
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

Gregory J. Lestini

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

Contribution pages 2

Expenditure pages 0

Other pages 0

Total pages 3

Statement of Contributions Received

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Name of Committee in Full Citizens for Lori M. Tyack							
Full Name of Contributor Boich Law Office, LLC					Registration Number, if PAC		
Street Address 750 Corss Pointe Rd, Ste 5		Employer/Occupation/Labor Organization* LLC			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 4	D 3 0	Y 0 9	Amount 500.00	
Full Name of Contributor Woody Fox Bail Bonds					Registration Number, if PAC		
Street Address 211 S. High Street		Employer/Occupation/Labor Organization* LLC			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 0	D 1 5	Y 0 8	Amount 100.00	
Full Name of Contributor Robert Suhr Attorney At Law					Registration Number, if PAC		
Street Address 755 South High St		Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43206	M 0 6	D 1 9	Y 0 9	Amount 550.00	
Full Name of Contributor Vicky Suhr					Registration Number, if PAC		
Street Address 59 Lakeview Dr, SE		Employer/Occupation/Labor Organization* Best Effort			Form (Cash, Check, etc.) Check		
City Thornville	State O H	Zip Code 43076	M 0 6	D 1 9	Y 0 9	Amount 250.00	
Full Name of Contributor Michael N. Oser, Attorney at Law					Registration Number, if PAC		
Street Address 35 East Livingston		Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 6	D 0 8	Y 0 9	Amount 50.00	
Full Name of Contributor Kathleen Cooper					Registration Number, if PAC		
Street Address 514 Stevenson Ave		Employer/Occupation/Labor Organization* Housewife			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 1 2	D 0 1	Y 0 8	Amount 50.00	
Full Name of Contributor Denise M. Mirman					Registration Number, if PAC		
Street Address 1446 Briar Meadow Dr		Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43235	M 1 1	D 0 6	Y 0 8	Amount 50.00	
Full Name of Contributor Matthew Tyack					Registration Number, if PAC		
Street Address 5381 Miller Church Road		Employer/Occupation/Labor Organization* Industrial Commission			Form (Cash, Check, etc.) Check		
City Johnstown	State O H	Zip Code 43031	M 0 9	D 2 6	Y 0 8	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 Citizens for Lori M. Tyack							
Full Name of Contributor Sharon Autin					Registration Number, if PAC		
Street Address 2130 Iuka Ave			Employer/Occupation/Labor Organization* Best Effort			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43201	M 1 0	D 0 9	Y 0 8	Amount 25.00
Full Name of Contributor Shirley Kramer					Registration Number, if PAC		
Street Address 3167 Rock Fence Drive			Employer/Occupation/Labor Organization* Housewife			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 1 0	D 0 5	Y 0 8	Amount 50.00
Full Name of Contributor Abe Bahgat, Attorney At Law					Registration Number, if PAC		
Street Address 338 South High St			Employer/Occupation/Labor Organization* Law Office			Form (Cash, Check, etc.) Check	
City Columbus		State o h	Zip Code 43215	M 1 0	D 1 0	Y 0 8	Amount 50.00
Full Name of Contributor Rosemary Pomeroy					Registration Number, if PAC		
Street Address 273 Heischman Lane			Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check	
City Worthington		State O H	Zip Code 43085	M 1 0	D 0 7	Y 0 8	Amount 50.00
Full Name of Contributor Robert J. Behal Law Offices, LLC					Registration Number, if PAC		
Street Address 501 S High St			Employer/Occupation/Labor Organization* LLC			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43215	M 0 9	D 2 9	Y 0 8	Amount 150.00
Full Name of Contributor Total Contributions from Form No. 31-E					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount 4,525.00
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

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