

Ohio Campaign Finance Report

Prescribed by Secretary of State 12/97

FILED
10 JUN 11 PM 4:03
FRANKLIN COUNTY
BOARD OF ELECTIONS

Full Name of Committee LABORERS' INTERNATIONAL UNION OF NORTH AMERICA LOCAL 423 PCE FUND						Registration Number, if PAC	
Street Address 620 Alum Creek Dr.						District	
City Columbus						State OH	Zip Code 43205
Date candidate last appeared on any ballot						M	Y
Type of Report (place X to the left of report type)	Pre-Primary	X	2010 Post-Primary	Pre-General	Post-General	Annual Year 2010	
	March Monthly		July Monthly	August Monthly	September Monthly	Termination	
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						Date of Election	
						M	D
							Y

Office Sought (Candidates only)

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	\$	816	04
2. Total monetary contributions (From Form No. 31-A)	\$	51,000	00
3. Total other income (From Form No. 31-A-2)	\$	5	38
4. Total funds available (sum of lines 1, 2, 3)	\$	51,821	42
5. Total monetary expenditures (From Form No. 31-B)	\$	39,250	00
6. Balance on hand (line 4 minus line 5)	\$	12,571	42
Value of in-kind contributions received (From Form No. 31-J-1)	\$		
Value of in-kind contributions made (From Form No. 31-J-2)	\$		
Outstanding loans owed by committee (From Form No. 31-C)	\$		
Outstanding debts owed by committee (From Form No. 31-N)	\$		
Outstanding loans owed to committee (From Form No. 31-K)	\$		
Value of independent expenditures made (From Form No. 31-U)	\$		

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.

JAMES H. GREEN, TREAS.

Signature

Date

6-11-10

Contribution pages 1

Expenditure pages 3

Other pages 1

Total pages 6

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Laborers' Internation Union of North America Local 423 PCE Fund							
Full Name of Contributor				Registration Number, if PAC			
Laborers' Local 423 General Fund				external transfer			
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
620 alum Creek Dr.							
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43205	05	28	10	500.00	
Full Name of Contributor				Registration Number, if PAC			
Laborers' Local 423 General Fund				external transfer			
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
620 alum Creek Dr.							
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43205	04	16	10	500.00	
Full Name of Contributor				Registration Number, if PAC			
Laborers' Local 423 General Fund				external transfer			
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
620 alum Creek Dr.							
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43205	04	16	10	50,000.00	
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	

* 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 Other Income

Prescribed by Secretary of State 2/98

Name of Committee in Full				LABORERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 423 PCE FUND				
Full Name				Registration Number, if PAC				
Chase Bank								
Address	Type*			M	D	Y	Amount	
Lockbourne Branch	I	N		0	5	28	10	2.91
City	State	Zip Code		Form (Cash, Check, etc.)				
Columbus	OH	43207						
Full Name				Registration Number, if PAC				
Chase Bank								
Address	Type*			M	D	Y	Amount	
Lockbourne Branch	I	N		0	4	30	10	2.47
City	State	Zip Code		Form (Cash, Check, etc.)				
Columbus	OH	43207						
Full Name				Registration Number, if PAC				
Address	Type*			M	D	Y	Amount	
City	State	Zip Code		Form (Cash, Check, etc.)				
Full Name				Registration Number, if PAC				
Address	Type*			M	D	Y	Amount	
City	State	Zip Code		Form (Cash, Check, etc.)				
Full Name				Registration Number, if PAC				
Address	Type*			M	D	Y	Amount	
City	State	Zip Code		Form (Cash, Check, etc.)				
Full Name				Registration Number, if PAC				
Address	Type*			M	D	Y	Amount	
City	State	Zip Code		Form (Cash, Check, etc.)				

¹ Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.

Page Total \$ 5.38

Statement of Expenditures

Prescribed by Secretary of State 8/95

Name of Committee in Full		LABORERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 423		PCE FUND		M	D	Y	Amount
To Whom Paid	David Robinson for 21st House		0	4	21	1	0	1,000.00	
Address	550 E. Walnut St		Purpose		Donation				
City	Columbus	State	OH	Zip Code	43215	Category Code*		COT	
To Whom Paid	Terry Brown for Franklin Co. Auditor		0	4	21	1	0	1,000.00	
Address	550 E. Walnut		Purpose		Donation				
City	Columbus	State	OH	Zip Code	43215	Category Code*		COT	
To Whom Paid	Mark A. Serrott Common Pleas Judge		0	4	21	1	0	3,000.00	
Address	1447 Beaman Dr.		Purpose		Donation				
City	Columbus	State	OH	Zip Code	43228	Category Code*		COT	
To Whom Paid	Richard Cordray for atty General		0	4	21	1	0	5,000.00	
Address	340 E. Fulton		Purpose		Donation				
City	Columbus	State	OH	Zip Code	43215	Category Code*		COT	
To Whom Paid	David Pepper for State Auditor		0	4	21	1	0	5,000.00	
Address	600 Vine St #28		Purpose		Donation				
City	Columbus	State	OH	Zip Code	43202	Category Code*			
To Whom Paid	Citizens for Julia Worrian for Co. Judge		0	4	21	1	0	3,000.00	
Address	67 E. State St. #500		Purpose		Donation				
City	Columbus	State	OH	Zip Code	43215	Category Code*		COT	
To Whom Paid	Michael Storziano for 25th House		0	5	11	1	0	1,000.00	
Address	550 W. Walnut		Purpose		Donation				
City	Columbus	State	OH	Zip Code	43215	Category Code*		COT	

* Review the instruction page to determine the appropriate category code.

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Name of Committee in Full		LABORERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 423				PCE FUND	
To Whom Paid	Address	Purpose	M	D	Y	Amount	
Kevin Boyce for Ohio Treasurer	250 West St. #700	Donation	0	52	51	5000.00	
City	Columbus	State OH Zip Code 43215	Category Code*		COT		
Franklin Co. Dem. Party Salute to achievements	271 E. State St	Donation	0	52	51	1750.00	
City	Columbus	State OH Zip Code COT	Category Code*		COT		
Laurel Beatty for Common Pleas Judge	65 E. State St. #1800	Donation	0	52	61	2000.00	
City	Columbus	State OH Zip Code 43215	Category Code*		COT		
Maryellen O'Shaughnessy for Secy of State	550 E. Walnut St.		0	60	21	5000.00	
City	Columbus	State OH Zip Code 43215	Category Code*		COT		
Michael Bwens for Common Pleas Judge	5 E. Long St. #501	Donation	0	60	31	1000.00	
City	Columbus	State OH Zip Code 43215	Category Code*		COT		
Nancy Harland for 20 th House Dist.		Donation	0	60	31	2000.00	
City		State Zip Code	Category Code*		COT		
Kimberly Cocroft for Common Pleas Judge	1480 W Dublin Rd	Donation	0	60	31	2000.00	
City	Columbus	State OH Zip Code 43215	Category Code*		COT		

* Review the instruction page to determine the appropriate category code.

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Prescribed by Secretary of State 8/95

Name of Committee in Full		LABORERS' INTERNATIONAL UNION OF NORTH AMERICA, LOCAL 423	
PCE FUND			
To Whom Paid	John Patrick Carney for State Rep.		M D Y Amount
Address	357 E. Jerome		06 03 10 500.00
City	State	Zip Code	Category Code*
Columbus	14		COT
To Whom Paid	Maria Harris for 19th House District		M D Y Amount
Address	5145 Holbrook Dr		06 03 10 2000.00
City	State	Zip Code	Category Code*
Columbus	OH	43232	COT
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Category Code*
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Category Code*
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Category Code*
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Category Code*
To Whom Paid			M D Y Amount
Address	Purpose		
City	State	Zip Code	Category Code*

* Review the instruction page to determine the appropriate category code.