

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

PAGE 1

FILED

10 JUL 25 PM 3:10

FRANKLIN COUNTY
BOARD OF ELECTIONS

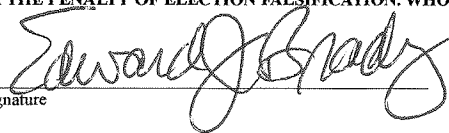
Full Name of Committee Citizens for the Westerville Public Library						Registration Number, if PAC							
Full Name of Candidate PAC SEMIANNUAL REPORT													
Street Address 96 Ormsbee Avenue						Office Sought			District				
City Westerville						State OH		Zip Code 43081					
Type of Report (place 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		0	^M 8	0	^D 7	0	^Y 7

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.

1. Amount brought forward from last report	\$	\$9,112.19
2. Total monetary contributions (From Form No. 31-A)	\$.
3. Total other income (From Form No. 31-A-2)	\$	\$0.24
4. Total funds available (sum of lines 1, 2, 3)	\$	\$9,112.43
5. Total monetary expenditures (From Form No. 31-B)	\$	\$0.00
6. Balance on hand (line 4 minus line 5)	\$	\$9,112.43
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.

Edward J. Brady, Treasurer



07/26/2010

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

Contribution pages 1

Expenditure pages 0

Other pages 5

Total pages 6

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full					
Citizens for the Westerville Public Library					
Full Name			Registration Number, if PAC		
US Bank*					
Address	Type*		M	D	Y
P. O. Box 1800	IN		0	3	3
City	State	Zip Code	1	1	0
St. Paul	MN		Amount		\$0.06
Form (Cash, Check, etc.)			cash		
Full Name			Registration Number, if PAC		
*Westerville Office					
Address	Type*		M	D	Y
833 South State Street	IN		0	4	3
City	State	Zip Code	0	1	0
	OH	43081	Amount		\$0.06
Form (Cash, Check, etc.)			cash		
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
	IN		0	5	3
City	State	Zip Code	1	0	
	OH		Amount		\$0.06
Form (Cash, Check, etc.)			cash		
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
	IN		0	6	3
City	State	Zip Code	0	1	
	OH		Amount		\$0.06
Form (Cash, Check, etc.)			cash		
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
City	State	Zip Code			
			Amount		
Form (Cash, Check, etc.)					
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
City	State	Zip Code			
			Amount		
Form (Cash, Check, etc.)					
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
City	State	Zip Code			
			Amount		
Form (Cash, Check, etc.)					
Full Name			Registration Number, if PAC		
Address	Type*		M	D	Y
City	State	Zip Code			
			Amount		
Form (Cash, Check, etc.)					

* 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.