

# Ohio Campaign Finance Report

FILED

Prescribed by Secretary of State 3/05

10 JUL 26 AM 9:52

Full Name of Committee <i>Ethical revenue initiative political action committee</i>						Registration Number, if PAC FRANKLIN COUNTY BOARD OF ELECTIONS		
Full Name of Candidate								
Street Address <i>7271 Innesome pke</i>					Office Sought		District	
City <i>Medina</i>					State <i>OH</i>		Zip Code <i>44256</i>	
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input type="checkbox"/> Post-Primary	<input type="checkbox"/> Pre-General	<input type="checkbox"/> Post-General	Annual Year			
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly	<input type="checkbox"/> Termination	<input checked="" type="checkbox"/> Semiannual <i>2010</i>			
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		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 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	\$	<i>15</i>	<i>49</i>
2. Total monetary contributions (From Form No. 31-A)	\$	<i>—</i>	<i>—</i>
3. Total other income (From Form No. 31-A-2)	\$	<i>—</i>	<i>—</i>
4. Total funds available (sum of lines 1, 2, 3)	\$	<i>15</i>	<i>49</i>
5. Total monetary expenditures (From Form No. 31-B)	\$	<i>—</i>	<i>—</i>
6. Balance on hand (line 4 minus line 5)	\$	<i>15</i>	<i>49</i>
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	<i>—</i>	<i>—</i>
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	<i>—</i>	<i>—</i>
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	<i>2050.00</i>	<i>00</i>
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	<i>—</i>	<i>—</i>
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	<i>—</i>	<i>—</i>
12. Value of independent expenditures made (From Form No. 31-U)	\$	<i>—</i>	<i>—</i>
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$	<i>—</i>	<i>—</i>

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.

*[Signature]* Print Name and Title (Treasurer and Deputy Treasurer only)      *James Rorer* Signature      *7/14/10* Date

Contribution pages _____	Expenditure pages _____	Other pages <i>1</i>	Total pages <i>2</i>
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# Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Ethical Revenue Initiative Political Action Committee</b>															
From Whom Received <b>John Stewart</b>								Prior Amount <b>\$2,050.00</b>		Amt. Incurred this Period <b>\$0.00</b>					
Address <b>855 Bryn Mawr</b>										Outstanding Balance <b>\$2,050.00</b>					
City <b>Gahanna</b>		St ate <b>OH</b>		Zip Code <b>43230</b>			Loans Received This Period			Payments This Period					
							Date		Date		Amount				
							M	D	Y	\$	M	D	Y	\$	
Date Loan was originally Incurred		0 6		1 5 0 6											
Registration Number, if PAC								M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*								M	D	Y		M	D	Y	
President, Trans International															
From Whom Received								Prior Amount		Amt. Incurred this Period					
Address										Outstanding Balance					
City		St ate		Zip Code			Loans Received This Period			Payments This Period					
		<b>OH</b>					Date		Date		Amount				
							M	D	Y	\$	M	D	Y	\$	
Date Loan was originally Incurred															
Registration Number, if PAC								M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*								M	D	Y		M	D	Y	
From Whom Received								Prior Amount		Amt. Incurred this Period					
Address										Outstanding Balance					
City		St ate		Zip Code			Loans Received This Period			Payments This Period					
		<b>OH</b>					Date		Date		Amount				
							M	D	Y	\$	M	D	Y	\$	
Date Loan was originally Incurred															
Registration Number, if PAC								M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*								M	D	Y		M	D	Y	

\* 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 also appear. [R.C. 3517.10(B)(4)]

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 31-A-2). Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Outstanding Balance to the Cover page (Form No. 30-A).

<sup>1</sup> Total prior amount \$ 2,050.00

<sup>2</sup> Total received this period \$ 0.00 (To Form No. 31-A-2)

<sup>3</sup> Total payments this period \$ 0.00 (To Form No. 31-B)

<sup>4</sup> Total Outstanding Balance \$ 2,050.00 (To Form No. 30-A)