

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

FILED
10 JUL 13 AM 10:52
SHELBY COUNTY
BOARD OF ELECTIONS

Full Name of Committee NEW ALBANY FOR KIDS		Registration Number, if PAC	
Full Name of Candidate			
Street Address 5195 HAMPTON VILLAGE WAY		Office Sought	District
City NEW ALBANY		State OH	Zip Code 43054
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input type="checkbox"/> Post-Primary	<input type="checkbox"/> Annual Year
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input checked="" type="checkbox"/> September Monthly
	<input type="checkbox"/> Termination	<input checked="" type="checkbox"/> Semiannual	2010
Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No	Report Electronically Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date of Election	M <input type="checkbox"/> D <input type="checkbox"/> Y <input type="checkbox"/>

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	\$	10,367	08
2. Total monetary contributions (From Form No. 31-A)	\$		
3. Total other income (From Form No. 31-A-2)	\$		
4. Total funds available (sum of lines 1, 2, 3)	\$	10,367	08
5. Total monetary expenditures (From Form No. 31-B)	\$	30	34
6. Balance on hand (line 4 minus line 5)	\$	10,336	74
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.

ALAN H. KLOEHL
Print Name and Title (Treasurer and Deputy Treasurer only)

Alan H. Kloehl
Signature

7/10/10
Date

Contribution pages _____

Expenditure pages 1

Other pages 1

Total pages 2

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full NEW ALBANY FOR KIDS										
To Whom Paid TED BERNARD						M	D	Y	Amount	
Address 5166 SETTLEMENT DR.						06		27	10	30.34
Purpose Reimbursement for Domain Renewal GOODBYE.COM										
City NEW ALBANY			State OH	Zip Code 43054	Check Number 611					
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					