

FILED

Ohio Campaign Finance Report

10 JUL 30 PM 3:44

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY
REGISTRATION NUMBER: 11818

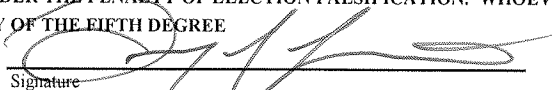
Full Name of Committee Citizens for Lori M. Tyack							Registration Number 11818		
Full Name of Candidate Lori M. Tyack									
Street Address 4080 Chelsea Bridge Lane					Office Sought Municipal Court Clerk			District	
City Gahanna					State O H		Zip Code 43230		
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General		Annual Year
	July Monthly		August Monthly		September Monthly		Termination		X Semiannual 2010
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 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	\$	18,653.43
2. Total monetary contributions (From Form No. 31-A)	\$	200.00
3. Total other income (From Form No. 31-A-2)	\$	
4. Total funds available (sum of lines 1, 2, 3)	\$	18,853.43
5. Total monetary expenditures (From Form No. 31-B)	\$	4,379.02
6. Balance on hand (line 4 minus line 5)	\$	14,474.41
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

7/30/2010
Date

Contribution pages 2

Expenditure pages 4

Other pages 34

Total pages 40

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Lori M Tyack							
Full Name of Contributor Joseph R. Landusky, Esq.					Registration Number, if PAC		
Street Address 901 S. High Street		Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Cash		
City Columbus	State O H	Zip Code 43206	M 0 4	D 1 6	Y 1 0	Amount 100.00	
Full Name of Contributor TOTAL CONTRIBUTIONS FROM FORM 31-G					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
			0 6	3 0	1 0	100.00	
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	
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)]

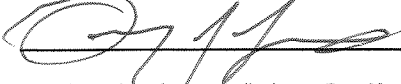
Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Lori M. Tyack									
Full Name of Contributor Rita LaForrest									
Street Address 1114 Slade Ave			M	D	Y	Amount			
			0	3	0	9	1	0	50.00
City Columbus	State O H	Zip Code 43235	Form (Cash, Check, etc) Check						
Full Name of Contributor Bill Beelman									
Street Address 221 Westwood Road			M	D	Y	Amount			
			0	4	0	8	1	0	25.00
City Columbus	State O H	Zip Code 43214	Form (Cash, Check, etc) Check						
Full Name of Contributor Bill Beelman									
Street Address 221 Westwood Road			M	D	Y	Amount			
			0	6	1	7	1	0	25.00
City Columbus	State O H	Zip Code 43214	Form (Cash, Check, etc) Check						
Full Name of Contributor									
Street Address			M	D	Y	Amount			
City	State	Zip Code	Form (Cash, Check, etc)						
Full Name of Contributor									
Street Address			M	D	Y	Amount			
City	State	Zip Code	Form (Cash, Check, etc)						
Full Name of Contributor									
Street Address			M	D	Y	Amount			
City	State	Zip Code	Form (Cash, Check, etc)						

The above are employees of a unit or department under the direct supervision or control of Lori M. Tyack, who currently holds the public office

of Franklin Co. Muni Clerk. I hereby affirm that each contribution was voluntarily made.

 (Signature of Treasurer or Deputy Treasurer)

Transfer total employee contributions to Form No. 31-A or 31-E, if received at a social or fundraising event. Under "Full Name of Contributor" state "Total employee contributions from form No. 31-G."

Page Total \$ 100.00

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full												
Citizens for Lori M. Tyack												
To Whom Paid						M	D	Y	Amount			
Choices (Eliminating Domestic Violence						0	1	1	4	1	0	20.00
Address			Purpose									
P.O. Box 06157			Annual Meeting Tickets									
City		State	Zip Code		Check Number							
Columbus		O	H 43206		288							
To Whom Paid						M	D	Y	Amount			
Sowers for Ohio						0	2	1	7	1	0	250.00
Address			Purpose									
426 Reinhard Avenue			Political Contribution									
City		State	Zip Code		Check Number							
Columbus		O	H 43206		289							
To Whom Paid						M	D	Y	Amount			
Interdenominational Ministerial Alliance						0	2	1	7	1	0	25.00
Address			Purpose									
1650 Wilson Avenue			Scholar Banquet Advertisement									
City		State	Zip Code		Check Number							
Columbus		O	H 43207		290							
To Whom Paid						M	D	Y	Amount			
Interdenominational Ministerial Alliance						0	2	1	8	1	0	30.00
Address			Purpose									
1650 Wilson Avenue			Scholarship Banquet Ticket									
City		State	Zip Code		Check Number							
Columbus		O	H 43207		291							
To Whom Paid						M	D	Y	Amount			
Friends of John O'Grady						0	3	0	2	1	0	50.00
Address			Purpose									
480 S. 3rd Street			St. Patrick's Day Fundraiser Contribution									
City		State	Zip Code		Check Number							
Columbus		O	H 43215		292							
To Whom Paid						M	D	Y	Amount			
United Way of Central Ohio						0	3	0	2	1	0	65.00
Address			Purpose									
360 S. Third Street			George Meany Charitable Contribution									
City		State	Zip Code		Check Number							
Columbus		O	H 43215		293							
To Whom Paid						M	D	Y	Amount			
Friends of Terry J. Brown						0	3	1	5	1	0	50.00
Address			Purpose									
550 East Walnut Street			Contribution									
City		State	Zip Code		Check Number							
Columbus		O	H 43215		294							
To Whom Paid						M	D	Y	Amount			
Ohio Ethics Commission						0	3	1	6	1	0	40.00
Address			Purpose									
30 W. Spring Street, L3			Filing Fee									
City		State	Zip Code		Check Number							
Columbus		O	H 43215		295							

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Name of Committee in Full Citizens for Lori M. Tyack												
To Whom Paid Central Ohio Labaor Council, AFL-CIO						M	D	Y	Amount			
						0	3	2	9	1	0	940.00
Address 1545 Alum Creek Drive, 2nd Fl.				Purpose Golf Outing Fundraising								
City Columbus		State O	H	Zip Code 43209		Check Number 298						
To Whom Paid The Links at Groveport						M	D	Y	Amount			
						0	4	0	1	1	0	150.00
Address 1005 Richardson Road				Purpose Golf Outing Deposit								
City Groveport		State O	H	Zip Code 43125		Check Number 299						
To Whom Paid Stonewall Democrats of Central Ohio						M	D	Y	Amount			
						0	4	1	3	1	0	250.00
Address P.O. Box 10814				Purpose Sponsor/ Annual Event								
City Columbus		State O	H	Zip Code 43201		Check Number 300						
To Whom Paid Franklin Co. Democratic Party						M	D	Y	Amount			
						0	4	1	9	1	0	150.00
Address 271 E. State Street				Purpose Annual Golf Outing								
City Columbus		State O	H	Zip Code 43215		Check Number 301						
To Whom Paid NAMI Ohio						M	D	Y	Amount			
						0	5	0	3	1	0	75.00
Address 747 E. Broad Street				Purpose Annual Dinner								
City Columbus		State O	H	Zip Code 43205		Check Number 302						
To Whom Paid Community Relations Commission						M	D	Y	Amount			
						0	5	0	3	1	0	25.00
Address 1111 E. Broad Street				Purpose Mayor's Prayer Lunch								
City Columbus		State O	H	Zip Code 43205		Check Number 303						
To Whom Paid MILVETS						M	D	Y	Amount			
						0	5	0	3	1	0	20.00
Address P.O. Box 311				Purpose Armed Forces Day Lunch								
City Worthington		State O	H	Zip Code 43085		Check Number 304						
To Whom Paid Maryellen for Ohio						M	D	Y	Amount			
						0	6	0	2	1	0	500.00
Address 340 E. Fulton Street				Purpose Contribution								
City Columbus		State O	H	Zip Code 43215		Check Number 378						

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Name of Committee in Full									
Citizens for Lori M. Tyack									
To Whom Paid						M	D	Y	Amount
PaPa Joe's						0	6	1	50.00
Address		Purpose							
3345 E. Main Street		Deposit for Food for 2010 Golf Outing							
City		State		Zip Code		Check Number			
Columbus		OH		43213		381			
To Whom Paid						M	D	Y	Amount
McTigue & McGinniss LLC						0	6	1	187.50
Address		Purpose							
550 E. Walnut Street		Legal Services to Campaign							
City		State		Zip Code		Check Number			
Columbus		OH		43215		382			
To Whom Paid						M	D	Y	Amount
Northland Community Council						0	6	1	100.00
Address		Purpose							
P.O. Box 297836		Parade Registration							
City		State		Zip Code		Check Number			
Columbus		OH		43229		383			
To Whom Paid						M	D	Y	Amount
Whitehall Community Celebration Assn.						0	4	1	100.00
Address		Purpose							
Best Effort		Parade Registration							
City		State		Zip Code		Check Number			
Whitehall		OH				384			
To Whom Paid						M	D	Y	Amount
Lori M. Tyack						0	6	2	132.00
Address		Purpose							
4080 Chelsea Bridge Lane		Reimbursement - 300 Postage Stamps							
City		State		Zip Code		Check Number			
Gahanna		OH		43230		385			
To Whom Paid						M	D	Y	Amount
Marilynn Stephens						0	6	2	51.22
Address		Purpose							
857 South 5th Street		Reimbursement - Postcards/Inkjet							
City		State		Zip Code		Check Number			
Columbus		OH		43206		386			
To Whom Paid						M	D	Y	Amount
Bricker & Eckler LLP						0	5	0	1,078.30
Address		Purpose							
100 S. 3rd Street		Legal Fees							
City		State		Zip Code		Check Number			
Columbus		OH		43215		377			
To Whom Paid						M	D	Y	Amount
Huntington National Bank						0	5	1	20.00
Address		Purpose							
P.O. Box 1558		Service Fees							
City		State		Zip Code		Check Number			
Columbus		OH		43216					

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Name of Committee in Full Citizens for Lori M. Tyack										
To Whom Paid Huntington National Bank						M	D	Y	Amount 20.00	
Address P.O. Box 1558						Purpose Service Fees				
City Columbus			State O H	Zip Code 43216		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				
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	