

posted OK

FILED

# Ohio Campaign Finance Report

APR 21 PM 2:11

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY  
BOARD OF ELECTIONS

Full Name of Committee <b>Harmon for Columbus City Council</b>							Registration Number, if PAC		
Full Name of Candidate <b>Phillip L. Harmon</b>									
Street Address <b>5312 Longrifle Rd.</b>						Office Sought <b>City Council</b>		District <b>Columbus</b>	
City <b>Westerville</b>						State <b>O H</b>		Zip Code <b>43081</b>	
Type of Report (place X to the left of report type)	<input checked="" 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	<input type="checkbox"/>	August	<input type="checkbox"/>	September	<input type="checkbox"/>	Termination	Semiannual
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Monthly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Monthly	<input type="checkbox"/>	Termination	
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
							0	5	0 3 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	\$	0.00
2. Total monetary contributions (From Form No. 31-A)	\$	8,262.00 ✓
3. Total other income (From Form No. 31-A-2)	\$	0.00
4. Total funds available (sum of lines 1, 2, 3)	\$	8,262.00 ✓
5. Total monetary expenditures (From Form No. 31-B)	\$	2,614.89 ✓
6. Balance on hand (line 4 minus line 5)	\$	5,647.11 ✓
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

Howard W. Amos, Treas.

Howard W. Amos

April 20 2005

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

Contribution  
pages 9

Expenditure  
pages 2

Other  
pages 15

Total  
pages 26

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Harmon for Columbus City Council</b>									
Full Name of Contributor <b>Phil Harmon</b>						Registration Number, if PAC			
Street Address <b>5312 Longrifle Rd.</b>			Employer/Occupation/Labor Organization* <b>Attorney</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Westerville</b>		State <b>O H</b>		Zip Code <b>43081</b>		M D Y <b>0 2 2 8 0 5</b>		Amount <b>45.00</b>	
Full Name of Contributor <b>Phil Harmon</b>						Registration Number, if PAC			
Street Address <b>5312 Longrifle Rd.</b>			Employer/Occupation/Labor Organization* <b>Attorney</b>				Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Westerville</b>		State <b>O H</b>		Zip Code <b>43081</b>		M D Y <b>0 3 1 6 0 5</b>		Amount <b>500.00</b>	
Full Name of Contributor <b>Phil Harmon</b>						Registration Number, if PAC			
Street Address <b>5312 Longrifle Rd.</b>			Employer/Occupation/Labor Organization* <b>Attorney</b>				Form (Cash, Check, etc.) <b>Credit Card</b>		
City <b>Westerville</b>		State <b>O H</b>		Zip Code <b>43081</b>		M D Y <b>0 3 1 8 0 5</b>		Amount <b>67.00</b>	
Full Name of Contributor <b>Phil Harmon</b>						Registration Number, if PAC			
Street Address <b>5312 Longrifle Rd.</b>			Employer/Occupation/Labor Organization* <b>Attorney</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Westerville</b>		State <b>O H</b>		Zip Code <b>43081</b>		M D Y <b>0 3 2 1 0 5</b>		Amount <b>500.00</b>	
Full Name of Contributor <b>Kay &amp; Keith Osborne</b>						Registration Number, if PAC			
Street Address <b>6357 Sharon Woods Blvd.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43229</b>		M D Y <b>0 3 2 2 0 5</b>		Amount <b>200.00</b>	
Full Name of Contributor <b>Pat Byrne</b>						Registration Number, if PAC			
Street Address <b>829 Oxley Rd.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43212</b>		M D Y <b>0 3 2 3 0 5</b>		Amount <b>500.00</b>	
Full Name of Contributor <b>John Delfino</b>						Registration Number, if PAC			
Street Address <b>2774 E. Livingston Ave.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43209</b>		M D Y <b>0 3 2 7 0 5</b>		Amount <b>500.00</b>	
Full Name of Contributor <b>Phil Harmon</b>						Registration Number, if PAC			
Street Address <b>5312 Longrifle Rd.</b>			Employer/Occupation/Labor Organization* <b>Attorney</b>				Form (Cash, Check, etc.) <b>Credit Card</b>		
City <b>Westerville</b>		State <b>O H</b>		Zip Code <b>43081</b>		M D Y <b>0 3 2 8 0 5</b>		Amount <b>300.00</b>	

\* 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 Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Harmon for Columbus City Council</b>									
Full Name of Contributor <b>Ron Jones</b>						Registration Number, if PAC			
Street Address <b>5286 Riverside Dr.</b>			Employer/Occupation/Labor Organization* <b>Coin-Op Vending</b>			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43220</b>		M <b>0</b>	D <b>3</b>	Y <b>3 0 0 5</b>	Amount <b>250.00</b>
Full Name of Contributor <b>Beverly Bowles</b>						Registration Number, if PAC			
Street Address <b>561 Elizabeth Ave.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43213</b>		M <b>0</b>	D <b>4</b>	Y <b>0 6 0 5</b>	Amount <b>100.00</b>
Full Name of Contributor <b>Kari Hansley</b>						Registration Number, if PAC			
Street Address <b>6988 St. Ninnians St.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Lewis Center</b>		State <b>O H</b>		Zip Code <b>43035</b>		M <b>0</b>	D <b>4</b>	Y <b>0 6 0 5</b>	Amount <b>250.00</b>
Full Name of Contributor <b>Ron Polster</b>						Registration Number, if PAC			
Street Address <b>300 Revere Rd.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43213</b>		M <b>0</b>	D <b>4</b>	Y <b>0 6 0 5</b>	Amount <b>50.00</b>
Full Name of Contributor <b>Frank Demos</b>						Registration Number, if PAC			
Street Address <b>7370 Sawmill Rd.</b>			Employer/Occupation/Labor Organization* <b>Dentist</b>			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Columbus</b>		State <b>O H</b>		Zip Code <b>43235</b>		M <b>0</b>	D <b>4</b>	Y <b>0 7 0 5</b>	Amount <b>100.00</b>
Full Name of Contributor <b>Terry O'Brien</b>						Registration Number, if PAC			
Street Address <b>1445 Fishinger Rd.</b>			Employer/Occupation/Labor Organization* <b>Attorney</b>			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Upper Arlington</b>		State <b>O H</b>		Zip Code <b>43221</b>		M <b>0</b>	D <b>4</b>	Y <b>0 7 0 5</b>	Amount <b>50.00</b>
Full Name of Contributor <b>Ron &amp; Janie Smith</b>						Registration Number, if PAC			
Street Address <b>5285 Elder Rd.</b>			Employer/Occupation/Labor Organization* <b>Businessman</b>			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Canal Winchester</b>		State <b>O H</b>		Zip Code <b>43110</b>		M <b>0</b>	D <b>4</b>	Y <b>0 7 0 5</b>	Amount <b>100.00</b>
Full Name of Contributor <b>Jane Byrne</b>						Registration Number, if PAC			
Street Address <b>1400 S. Joyce St., Apt. 619</b>			Employer/Occupation/Labor Organization* <b>American Engineering Society</b>			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Arlington</b>		State <b>V A</b>		Zip Code <b>22202</b>		M <b>0</b>	D <b>4</b>	Y <b>0 8 0 5</b>	Amount <b>40.00</b>

\* 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 Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Harmon for Columbus City Council</b>							
Full Name of Contributor <b>Russell &amp; Yun Cha Gorsuch</b>					Registration Number, if PAC		
Street Address <b>5635 Harlem Rd.</b>		Employer/Occupation/Labor Organization* <b>Retired Businessman</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>New Albany</b>	State <b>O   H</b>	Zip Code <b>43054</b>	M <b>0</b>	D <b>4</b>	Y <b>0</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>Patsy Harmon</b>					Registration Number, if PAC		
Street Address <b>1862 Fishinger Road</b>		Employer/Occupation/Labor Organization* <b>Retired Homemaker</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Upper Arlington</b>	State <b>O   H</b>	Zip Code <b>43220</b>	M <b>0</b>	D <b>4</b>	Y <b>0</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Joe &amp; Barbara Powell</b>					Registration Number, if PAC		
Street Address <b>6664 Miller Paul Rd.</b>		Employer/Occupation/Labor Organization* <b>Honda</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Westerville</b>	State <b>O   H</b>	Zip Code <b>43082</b>	M <b>0</b>	D <b>4</b>	Y <b>0</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Violet Bratton</b>					Registration Number, if PAC		
Street Address <b>8384 Orchard Knoll Ln.</b>		Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43235</b>	M <b>0</b>	D <b>4</b>	Y <b>0</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Sung Harmon</b>					Registration Number, if PAC		
Street Address <b>5312 Longrifle Road</b>		Employer/Occupation/Labor Organization* <b>Nordstrom</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Westerville</b>	State <b>O   H</b>	Zip Code <b>43081</b>	M <b>0</b>	D <b>4</b>	Y <b>0</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>Pat French</b>					Registration Number, if PAC		
Street Address <b>2105 Tamarin Drive</b>		Employer/Occupation/Labor Organization* <b>Fed-Express</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43235</b>	M <b>0</b>	D <b>4</b>	Y <b>1</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Matt &amp; Kimi Tomkinson</b>					Registration Number, if PAC		
Street Address <b>5191 Eaglesnest Ct.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Westerville</b>	State <b>O   H</b>	Zip Code <b>43081</b>	M <b>0</b>	D <b>4</b>	Y <b>1</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>John &amp; Sharon Gaus</b>					Registration Number, if PAC		
Street Address <b>8585 Renford Ct.</b>		Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Powell</b>	State <b>O   H</b>	Zip Code <b>43065</b>	M <b>0</b>	D <b>4</b>	Y <b>1</b>	Amount <b>100.00</b>	

\* 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 Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Harmon for Columbus City Council</b>							
Full Name of Contributor <b>Randy &amp; Louise Fleming</b>						Registration Number, if PAC	
Street Address <b>57 Valley Run Drive</b>			Employer/Occupation/Labor Organization* <b>Northwestern Mutual Life Ins. Co.</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Powell</b>		State <b>O H</b>	Zip Code <b>43065</b>		M <b>0 4</b>	D <b>1 2</b>	Y <b>0 5</b>
						Amount <b>50.00</b>	
Full Name of Contributor <b>Ron Stone</b>						Registration Number, if PAC	
Street Address <b>1406 Studer Ave.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>		State <b>O H</b>	Zip Code <b>43206</b>		M <b>0 4</b>	D <b>1 2</b>	Y <b>0 5</b>
						Amount <b>100.00</b>	
Full Name of Contributor <b>Brenda Belisle</b>						Registration Number, if PAC	
Street Address <b>1126 Rockport Lane</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>		State <b>O H</b>	Zip Code <b>43235</b>		M <b>0 4</b>	D <b>1 3</b>	Y <b>0 5</b>
						Amount <b>100.00</b>	
Full Name of Contributor <b>Linda Dachtyl</b>						Registration Number, if PAC	
Street Address <b>4845 Ridgerun Dr.</b>			Employer/Occupation/Labor Organization* <b>Musician</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>		State <b>O H</b>	Zip Code <b>43229</b>		M <b>0 4</b>	D <b>1 3</b>	Y <b>0 5</b>
						Amount <b>50.00</b>	
Full Name of Contributor <b>Maurice McCoy</b>						Registration Number, if PAC	
Street Address <b>5773 N. Meadows Blvd.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>		State <b>O H</b>	Zip Code <b>43229</b>		M <b>0 4</b>	D <b>1 3</b>	Y <b>0 5</b>
						Amount <b>100.00</b>	
Full Name of Contributor <b>Nancy Pisano</b>						Registration Number, if PAC	
Street Address <b>159 Cherokee Drive</b>			Employer/Occupation/Labor Organization* <b>Brewstirs</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Westerville</b>		State <b>O H</b>	Zip Code <b>43081</b>		M <b>0 4</b>	D <b>1 3</b>	Y <b>0 5</b>
						Amount <b>50.00</b>	
Full Name of Contributor <b>Jimmy Ryan</b>						Registration Number, if PAC	
Street Address <b>34 Medbrook Way</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Cash</b>	
City <b>Columbus</b>		State <b>O H</b>	Zip Code <b>43214</b>		M <b>0 4</b>	D <b>1 3</b>	Y <b>0 5</b>
						Amount <b>50.00</b>	
Full Name of Contributor <b>Phil Harmon</b>						Registration Number, if PAC	
Street Address <b>5312 Longrifle Rd.</b>			Employer/Occupation/Labor Organization* <b>Attorney</b>			Form (Cash, Check, etc.) <b>Cash</b>	
City <b>Westerville</b>		State <b>O H</b>	Zip Code <b>43081</b>		M <b>0 4</b>	D <b>1 4</b>	Y <b>0 5</b>
						Amount <b>145.00</b>	

\* 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 Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Harmon for Columbus City Council</b>							
Full Name of Contributor <b>Dick Allen</b>						Registration Number, if PAC	
Street Address <b>2774 Clifton Rd.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Cash</b>	
City <b>New Albany</b>		State <b>O   H</b>	Zip Code <b>43054</b>	M <b>0</b>	D <b>4</b>	Y <b>1   4   0   5</b>	Amount <b>50.00</b>
Full Name of Contributor <b>Bryan Bailey</b>						Registration Number, if PAC	
Street Address <b>2395 Findley Ave.</b>			Employer/Occupation/Labor Organization* <b>CompUSA</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43202</b>	M <b>0</b>	D <b>4</b>	Y <b>1   4   0   5</b>	Amount <b>50.00</b>
Full Name of Contributor <b>Robert Basbagill</b>						Registration Number, if PAC	
Street Address <b>4987 Fullerton Dr.</b>			Employer/Occupation/Labor Organization* <b>Pres., Cols. Shamrock Club</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Madison Twp.</b>		State <b>O   H</b>	Zip Code <b>43232</b>	M <b>0</b>	D <b>4</b>	Y <b>1   4   0   5</b>	Amount <b>50.00</b>
Full Name of Contributor <b>Beverly Bowles</b>						Registration Number, if PAC	
Street Address <b>561 Elizabeth Ave.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43213</b>	M <b>0</b>	D <b>4</b>	Y <b>1   4   0   5</b>	Amount <b>150.00</b>
Full Name of Contributor <b>Judy &amp; Roger Browning</b>						Registration Number, if PAC	
Street Address <b>6645 Ambleside Dr.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Cash</b>	
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43229</b>	M <b>0</b>	D <b>4</b>	Y <b>1   4   0   5</b>	Amount <b>100.00</b>
Full Name of Contributor <b>Tim Cashin</b>						Registration Number, if PAC	
Street Address <b>1312 S. High Street</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Cash</b>	
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43206</b>	M <b>0</b>	D <b>4</b>	Y <b>1   4   0   5</b>	Amount <b>60.00</b>
Full Name of Contributor <b>Robert Cesner</b>						Registration Number, if PAC	
Street Address <b>456 Haymore Ave. N.</b>			Employer/Occupation/Labor Organization* <b>Attorney</b>			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Worthington</b>		State <b>O   H</b>	Zip Code <b>43085</b>	M <b>0</b>	D <b>4</b>	Y <b>1   4   0   5</b>	Amount <b>100.00</b>
Full Name of Contributor <b>Frank Commendatore</b>						Registration Number, if PAC	
Street Address <b>7426 Sawmill Rd.</b>			Employer/Occupation/Labor Organization* <b>Bar Owner</b>			Form (Cash, Check, etc.) <b>Cash</b>	
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43235</b>	M <b>0</b>	D <b>4</b>	Y <b>1   4   0   5</b>	Amount <b>50.00</b>

\* 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)]