30-A R.C. 3517.10

Ohio Campaign Finance Report

Ser Series Series

09 JUL 30 PM 4: 32

	Prescribed by Secretary of State 3/05										JU CL				
Full Name of Committee												ation Nu	N UU nbedintP	UNT ACHŪ	MS
Committee 4 C	Childre	∍n								į.	DAN	o or	Land Marin Briton		
Full Name of Candidate			··		***************************************	^									
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Street Address 230 West Street, Suite 700									Office Sought				District		
City										St	ate	Zip Co	le		
Columbus										ОН		4	13215	õ	
Type of Report		Pre-Primary.			Post-Pri	mary			Pre-General		Post-Ge	neral		Annual \	<u>∕ear</u>
(place X to the left of report type)		July Monthly			August Monthly	/			September Monthly		Termin	ation		Semiann	ual
Amended Report? Tes	No E	Report Elect	ronically File	ed?	Yes	■ No	D	ite of l	Election	1 1	1	0	3	0	9
For candidates only, during an	election v	ear: if total co	ntributions a	nd exn	enditures	each total \$500	0 or less	durins	the combined pre- an	d nost-neri	ods at on	e election	check h	ov []	<u> </u>
No other forms are required fo	r a post-pr	imary or post-	general perio	od, if a	ibove state	ement applies.	See R.C	3517	10(H) for details.	и розг-реп		c cicciioi	, check o	·0x 🗀	
		N							ď	24.64	6 50				
	1. An	iount brough	t forward fr	om las	st report				\$ 4	24,64	0.50				
•	2. Tot	al monetary (contribution	18 (Fra	om Form I	No. 31-A)			\$	46,72	5.00				
	3. Tot	al other Incor	ne (From F	orm N	(o. 31-A-2)	j.			S						
	4. Tot	al funds avail	able (sum o	f lines	1, 2, 3)				\$	71,37	1.50				
	5. Tot	al monetary (xpenditure	s (Froi	m Form N	(o. 31-B)			\$	21,49	3.16				
	6. Balance on hand (line 4 minus line 5)							\$49,878.34							
	7. Val	ue of in-kind	contributio	ns rece	eived (Fro	m Form No. 3	31-J-1)			\$1,444	1.00				
	8. Vali	ue of in-kind	contribution	ns mac	le (From l	Form No. 31	J-2)								
	9. Out	standing loar	is owed by c	commi	ttee (Fron	n Form No. 31	1-C)			.\$0	.00				
	10. Ou	itstanding del	ots owed by	comm	uittee (Fro	om Form No. 3	31-N)			\$(.00				
	11. Ou	tstanding loa	ns owed to a	commi	ittee (Fron	m Form No. 3	1-K)	3		\$(.00				
	12. Va	lue of indeper	ident expen	diture	s made (F	rom Form No	o. 31-U)	3		<u>zajna (uronovene ceneral</u>					
		r Electronic F m of lines 2, "				oans received	this per	iod. S							
THE INFORMATION CONT	'AINED II	V THIS REP	ORT IS MA	DE III	NDER TE	ie penalty	/ Ope	ECTI	ON FALSIFICATIO	N WDO:	VEDC		FIFO	YON	
ALSIFICATION IS GUILTY	OFAF	SLONY OF T	HE FIFTH	I DEG	REE.				J. LIMOIPICATIO	· · · · · · · · · · · ·	, eac			NOA	
Paul R Anderson, Treasurer int Name and Title (Treasurer and Deputy Treasurer only) Signature											07/23	3/09			
ing traine and this (treasurer	ани глери	ty ricasurer of	шу <i>)</i>		Signate	ui e						Date			
Contribution 2		E	expenditure pages_	1				Othe	4			1	Fotal pages	4	