

10/18/2013 12:11

30-A  
R.C. 3517.10

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Committee to Elect Dustin Proehl to City Council At Large</b>						Registration Number, if PAC			
Full Name of Candidate <b>Dustin E. Proehl</b>									
Street Address <b>13 Club Drive</b>						Office Sought <b>City Council At large</b>		District <b>Ross</b>	
City <b>Chillicothe</b>						State <b>O H</b>	Zip Code <b>45601</b>		
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		<b>X</b>	Pre-General		Post-General	Annual Year
	July Monthly		August Monthly			September Monthly		Termination	Semiannual
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	D	Y	
						1	1	0	5
								1	3

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	\$	584.83	✓
2. Total monetary contributions (From Form No. 31-A)	\$	20.00	✓
3. Total other income (From Form No. 31-A-2)	\$	0.00	
4. Total funds available (sum of lines 1, 2, 3)	\$	604.83	✓
5. Total monetary expenditures (From Form No. 31-B)	\$	570.00	✓
6. Balance on hand (line 4 minus line 5)	\$	34.83	✓
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	\$	0.00	
Sum of lines 2, 7 and amount of any new loans received this period	\$	0.00	

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.

Holly E. Proehl (Deputy Treasurer)  
Print Name and Title (Treasurer and Deputy Treasurer only)

Holly E Proehl  
Signature

10/18/13  
Date

Contribution pages 1

Expenditure pages 1

Other pages 1

Total pages 3

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Committee to Elect Dustin Proehl to City Council At Large</b>									
Full Name of Contributor <b>John N. Downing</b>						Registration Number, if PAC			
Street Address <b>85 Cooks Hill Rd.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check 5065</b>		
City <b>Chillicothe</b>		State <b>O H</b>		Zip Code <b>45601</b>		M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>20.00</b>
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
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)]

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Committee to Elect Dustin Proehl</b>							
To Whom Paid <b>Andrew Burgoon</b>				M	D	Y	Amount
Address <b>14 1/2 E. 2nd Street</b>				<b>0</b>	<b>8</b>	<b>2513</b>	<b>100.00</b>
City <b>Chillicothe</b>				Purpose <b>Virtual Yard Sign-banner, website, and Facebook</b>		Check Number	
State <b>OH</b>		Zip Code <b>45601</b>		<b>1009</b>			
To Whom Paid <b>Chillicothe Jaycees/Lions Halloween Parade</b>							Amount
Address <b>P.O. Box 6186</b>				M	D	Y	Amount
City <b>Chillicothe</b>				<b>1</b>	<b>0</b>	<b>0713</b>	<b>50.00</b>
State <b>OH</b>				Purpose <b>Parade Entry Fee</b>		Check Number	
Zip Code <b>45601</b>		<b>1010</b>		<i>Not cleared</i>			
To Whom Paid <b>Ohio Democratic Party</b>							Amount
Address <b>340 E. Fulton St.</b>				M	D	Y	Amount
City <b>Columbus</b>				<b>1</b>	<b>0</b>	<b>0713</b>	<b>420.00</b>
State <b>OH</b>				Purpose <b>Donation to the Ohio Democratic Party</b>		Check Number	
Zip Code <b>43215</b>		<b>1011</b>					
To Whom Paid							Amount
Address				M	D	Y	Amount
City							
State				Zip Code		Check Number	
To Whom Paid							Amount
Address				M	D	Y	Amount
City							
State				Zip Code		Check Number	
To Whom Paid							Amount
Address				M	D	Y	Amount
City							
State				Zip Code		Check Number	
To Whom Paid							Amount
Address				M	D	Y	Amount
City							
State				Zip Code		Check Number	
To Whom Paid							Amount
Address				M	D	Y	Amount
City							
State				Zip Code		Check Number	