

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Ok needs receipt for things but

11/23-12/08

Full Name of Committee Ross County Republican Women						Registration Number, if PAC								
Full Name of Candidate														
Street Address 129 East Main St., PO Box 1614				Office Sought		District								
City Chillicothe				State OH		Zip Code 45601								
Type of Report (place X to the left of report type)	<input type="checkbox"/>	Pre-Primary	<input type="checkbox"/>	Post-Primary	<input type="checkbox"/>	Pre-General	<input checked="" type="checkbox"/>	Post-General	<input type="checkbox"/>	Annual Year				
	<input type="checkbox"/>	July Monthly	<input type="checkbox"/>	August Monthly	<input type="checkbox"/>	September Monthly	<input type="checkbox"/>	Termination	<input type="checkbox"/>	Semiannual				
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				
						1	M	1	0	D	5	1	V	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 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	\$	\$1,424.48
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)	\$	\$1,424.48
5. Total monetary expenditures (From Form No. 31-B)	\$	\$100.00
6. Balance on hand (line 4 minus line 5)	\$	\$1,324.48
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.

Cheryl Richards

Cheryl Richards

11/24/13

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

Contribution pages _____

Expenditure pages 1

Other pages _____

Total pages 1

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Ross County Republican Women									
To Whom Paid Morgan O'Dell						M	D	Y	Amount
						0	9	1013	50.00
Address 615 Seminole Rd.			Purpose Morgan O'Dell-Council at Large Campaign						
City Chillicothe		State O	H	Zip Code 45601	Check Number 1046				
To Whom Paid Missy Butt						M	D	Y	Amount
						0	9	1013	50.00
Address 9 Timberlane Dr.			Purpose Missy Butt-Scioto Township Trustee Campaign						
City Chillicothe		State O	H	Zip Code 45601	Check Number 1047				
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City		State	H	Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City		State	H	Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City		State	H	Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City		State	H	Zip Code	Check Number				
To Whom Paid						M	D	Y	Amount
Address			Purpose						
City		State	H	Zip Code	Check Number				