

Ohio Campaign Finance Report



Prescribed by Secretary of State 3/05

Full Name of Committee Citizens for Pat Patrick					Registration Number, if PAC											
Full Name of Candidate Patricia A. Patrick																
Street Address 728 East Main St.					Office Sought 6th Ward City Council			District 6th Ward								
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 type="checkbox"/>	Post-General	<input checked="" type="checkbox"/>	Annual Year 2016						
	<input type="checkbox"/>	July Monthly	<input type="checkbox"/>	August Monthly	<input type="checkbox"/>	September Monthly	<input checked="" 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	7	1	Y	7

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	\$	\$16.21
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)	\$	\$16.21
5. Total monetary expenditures (From Form No. 31-B)	\$	\$16.21
6. Balance on hand (line 4 minus line 5)	\$	\$0.00
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.	\$.

Report is:
OK: NEEDS INFO / AMENDED IN CFS
SCANNED FOR ONLINE

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.

Patricia A. Patrick - Deputy Treasurer

Patricia A. Patrick
Signature

01/13/2017

Print Name and Title (Treasurer and Deputy Treasurer only)

Date

Contribution pages _____

Expenditure pages 1

Other pages 1

Total pages 2

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Citizens for Pat Patrick							
To Whom Paid Ross County Republican Party				M	D	Y	Amount \$16.21
Address P.O. Box 1803				Purpose Fish Fry Tickets			
City Chillicothe		State OH	Zip Code 45601	Check Number 115			
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City		State OH	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City		State OH	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City		State OH	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City		State OH	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City		State OH	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City		State OH	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address				Purpose			
City		State OH	Zip Code	Check Number			