

CANDIDATE / OFFICEHOLDER

FORM C/OH

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST	MI
NAME	NICKNAME	LAST	SUFFIX

OFFICE USE ONLY

Date Received

OFFICEHOLDER MAILING			
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CANDIDATE / OFFICEHOLDER	AREA CODE	PHONE NUMBER	EXTENSION
NAME			

Date Imaged

ADDRESS	
(Residence or Business)	

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**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PAGE 1**

NAME OF CANDIDATE / OFFICEHOLDER
Michael J. Kelly

POLITICAL

SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.

OF YOUR EXPENDITURES

OF YOUR EXPENDITURES

COMMITTEE TYPE

COMMITTEE NAME

COMMITTEE TYPE (SEE INSTRUCTIONS)

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

Additional Pages

**2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)**

\$

1000

EXPENDITURE

TOTAL

UNLESS ITEMIZED

TOTAL POLITICAL EXPENDITURES

OF REPORTING PERIOD/REPORTING PERIOD

UNSTATED

TOTAL POLITICAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE

DATE

DATE OF THE REPORTING PERIOD