

BACKGROUND & SUMMARY INFORMATION

NAME Kevin Patrick Walter

STREET ADDRESS 6289 Ross Bend

CITY Dublin **STATE** OH **ZIP CODE** 43016

OFFICE SOUGHT Dublin City Council - At Large

NAME OF TREASURER KP Walter

TYPE OF REPORT

32 DAYS PRIOR TO ELECTION

11 DAYS PRIOR TO ELECTION

38 DAYS FOLLOWING ELECTION

Cumulative total of all contributions received,
from campaign start through current report
date
(from Statement of Contributions Received
total)

\$ 4645.00

Cumulative value of all in-kind contributions received,
from campaign start through current report
date
(from Statement of In-Kind Contributions Received
total)

\$ -0-

Cumulative total of all expenditures made,
from campaign start through current report
date
(from Statement of Expenditures
total)

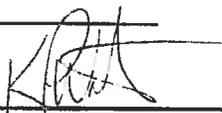
\$ 924.00

SIGNATURE

By signing below, I swear or affirm that this statement and any additional attachments have been prepared or carefully reviewed by me, and constitute my complete, truthful and correct disclosure of all required information.

Name: Kevin P Walter

Date: 10/2/15

Signature:  _____

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Walter4Dublin									
Full Name of Contributor Barbara Kadunc					Registration Number, if PAC				
Street Address PO Box 1226			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Dublin			State O H	Zip Code 43017	M 0 6	D 2 6	Y 1 5		
					Amount 75.00				
Full Name of Contributor Christina Heinlen									
Street Address 6440 Green Stone Loop					Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin			State O H	Zip Code 43016	M 0 7	D 2 2	Y 1 5		
					Amount 100.00				
Full Name of Contributor Lisa Judson									
Street Address 8018 Summerhouse Dr. W					Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin			State O H	Zip Code 43016	M 0 7	D 2 2	Y 1 5		
					Amount 100.00				
Full Name of Contributor Peter L Coratola Sr.									
Street Address 8330 Strasbourg Ct					Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin			State O H	Zip Code 43017	M 0 7	D 2 0	Y 1 5		
					Amount 250.00				
Full Name of Contributor Nicoletta Leib									
Street Address 8564 Crail Ct					Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin			State O H	Zip Code 43017	M 0 7	D 1 2	Y 1 5		
					Amount 100.00				
Full Name of Contributor Howard Baulch									
Street Address 6168 Inverurie Dr E					Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin			State O H	Zip Code 43017	M 0 7	D 2 3	Y 1 5		
					Amount 250.00				
Full Name of Contributor Mark Mace									
Street Address 6469 Greenstone Loop					Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin			State O H	Zip Code 43016	M 0 7	D 2 4	Y 1 5		
					Amount 75.00				
Full Name of Contributor Summit Shah									
Street Address 6268 Bellow Valley					Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin			State O H	Zip Code 43016	M 0 7	D 2 4	Y 1 5		
					Amount 250.00				

* 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 Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Walter4Dublin							
Full Name of Contributor Lekha Shah					Registration Number, if PAC		
Street Address 6268 Bellow Valley			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin		State O H	Zip Code 43016	M 0 7	D 2 4	Y 1 5	Amount 250.00
Full Name of Contributor Dominique A Brunet					Registration Number, if PAC		
Street Address 6816 Enfield Trace			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin		State O H	Zip Code 43017	M 0 7	D 2 6	Y 1 5	Amount 25.00
Full Name of Contributor John Hardt					Registration Number, if PAC		
Street Address 7070 Gorden Farms Pkwy			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin		State O H	Zip Code 43017	M 0 7	D 2 6	Y 1 5	Amount 250.00
Full Name of Contributor Nancy R Gernstetter					Registration Number, if PAC		
Street Address 4689 Donegal Cliffs Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin		State O H	Zip Code 43017	M 0 7	D 2 7	Y 1 5	Amount 50.00
Full Name of Contributor Kelly Ackert					Registration Number, if PAC		
Street Address 8597 Finlarig Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin		State O H	Zip Code 43017	M 0 7	D 2 7	Y 1 5	Amount 50.00
Full Name of Contributor Betty Blumenauer					Registration Number, if PAC		
Street Address 6004 Kirkwall Ct.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin		State O H	Zip Code 43017	M 0 7	D 2 7	Y 1 5	Amount 20.00
Full Name of Contributor Tim Spencer					Registration Number, if PAC		
Street Address 8094 Holyrood Court			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin		State O H	Zip Code 43017	M 0 7	D 2 9	Y 1 5	Amount 75.00
Full Name of Contributor John Wirchanski					Registration Number, if PAC		
Street Address 160 Franklin Street			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin		State O H	Zip Code 43017	M 0 7	D 2 9	Y 1 5	Amount 250.00

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Name of Committee in Full Walter4Dublin							
Full Name of Contributor Thomas Hickey					Registration Number, if PAC		
Street Address 8692 Tartan Fields Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Dublin	State O H	Zip Code 43017	M 0	D 7	Y 3 0 1 5	Amount 50.00	
Full Name of Contributor Rich Taylor					Registration Number, if PAC		
Street Address 4500 Belair Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0	D 7	Y 3 0 1 5	Amount 250.00	
Full Name of Contributor Jill Thomas					Registration Number, if PAC		
Street Address 3173 Martin Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Dublin	State O H	Zip Code 43017	M 0	D 7	Y 3 1 1 5	Amount 25.00	
Full Name of Contributor Jodi Rhodes					Registration Number, if PAC		
Street Address 6475 Green Stone Loop		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Dublin	State O H	Zip Code 43016	M 0	D 7	Y 3 1 1 5	Amount 50.00	
Full Name of Contributor Paul Swift					Registration Number, if PAC		
Street Address 6181 Memorial Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Dublin	State O H	Zip Code 43017	M 0	D 8	Y 0 4 1 5	Amount 100.00	
Full Name of Contributor Robert Boich					Registration Number, if PAC		
Street Address 7590 Bellaire Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Dublin	State O H	Zip Code 43017	M 0	D 8	Y 0 4 1 5	Amount 150.00	
Full Name of Contributor Julie Stoddard Smith					Registration Number, if PAC		
Street Address 6258 Memorial Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Dublin	State O H	Zip Code 43017	M 0	D 8	Y 0 9 1 5	Amount 50.00	
Full Name of Contributor Marilyn Economou					Registration Number, if PAC		
Street Address 5766 Loch Maree Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0	D 8	Y 1 0 1 5	Amount 25.00	

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Prescribed by Secretary of State 3/05

Name of Committee in Full Walter4Dublin									
Full Name of Contributor William Bownas						Registration Number, if PAC			
Street Address 7365 Bellaire Ave			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin		State O H	Zip Code 43017		M 0 8	D 1 3	Y 1 5	Amount 200.00	
Full Name of Contributor Brendan Kelly						Registration Number, if PAC			
Street Address 111 W 1st Ave, Apt 12			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Columbus		State O H	Zip Code 43201		M 0 8	D 1 4	Y 1 5	Amount 25.00	
Full Name of Contributor Daniel Walter						Registration Number, if PAC			
Street Address 738 Decker Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Georgia		State V I	Zip Code 05468		M 0 8	D 2 2	Y 1 5	Amount 50.00	
Full Name of Contributor Michelle Thomas						Registration Number, if PAC			
Street Address 6321 Ross Bend			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin		State O H	Zip Code 43016		M 0 8	D 2 8	Y 1 5	Amount 150.00	
Full Name of Contributor Cap Clegg						Registration Number, if PAC			
Street Address 5334 McGinty Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin		State O H	Zip Code 43017		M 0 9	D 0 9	Y 1 5	Amount 100.00	
Full Name of Contributor Mark Dewalt						Registration Number, if PAC			
Street Address 8851 Sunart Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin		State O H	Zip Code 43017		M 0 9	D 1 1	Y 1 5	Amount 100.00	
Full Name of Contributor Timothy Spencer						Registration Number, if PAC			
Street Address 8094 Holyrood Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin		State O H	Zip Code 43017		M 0 9	D 1 1	Y 1 6	Amount 50.00	
Full Name of Contributor Charles Marlowe						Registration Number, if PAC			
Street Address 8490 Torwoodlee Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin		State O H	Zip Code 43017		M 0 9	D 1 1	Y 1 5	Amount 250.00	

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Walter4Dublin						
Full Name of Contributor Suhail Zidan				Registration Number, if PAC		
Street Address 6296 Ross Bend		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin	State O H	Zip Code 43017	M 0 9	D 1 1	Y 1 5	Amount 250.00
Full Name of Contributor Pat Grabill				Registration Number, if PAC		
Street Address 2970 Arbuckle Rd NW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City London	State O H	Zip Code 43140	M 0 9	D 1 4	Y 1 5	Amount 250.00
Full Name of Contributor Scott Wood				Registration Number, if PAC		
Street Address 34 Pepperbush Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Amston	State C T	Zip Code 06231	M 0 9	D 2 5	Y 1 5	Amount 250.00
Full Name of Contributor Julie Helmreich				Registration Number, if PAC		
Street Address 6600 Deeside Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin	State O H	Zip Code 43017	M 0 9	D 2 5	Y 1 5	Amount 100.00
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

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Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Walter4Dublin				
To Whom Paid Stripe	M	D	Y	Amount
	1	0	1	85.65
Address 3180 18th St	Purpose Credit Card Processing Fees			
City San Francisco	State C	Zip Code A 94110	Check Number Stripe Fee	
To Whom Paid BMI FCU	M	D	Y	Amount
	0	8	1	3.00
Address 6165 Emerald Pkwy	Purpose Cahsiers Check Fee			
City Dublin	State O	Zip Code H 43016	Check Number	
To Whom Paid Dublin Scioto Touchdown Club	M	D	Y	Amount
	0	8	1	400.00
Address 6556 Birchton	Purpose Football Program Advertising			
City Dublin	State O	Zip Code H 43016	Check Number 244730	
To Whom Paid GoDaddy	M	D	Y	Amount
	0	4	1	25.36
Address 14455 N Hayden Rd	Purpose Domain Services			
City Scottsdale	State A	Zip Code Z 85260	Check Number PayPal	
To Whom Paid GoDaddy	M	D	Y	Amount
	0	7	2	13.01
Address 14455 N Hayden Rd	Purpose Domain Services			
City Scottsdale	State A	Zip Code Z 85260	Check Number PayPal	
To Whom Paid GoDaddy	M	D	Y	Amount
	0	7	3	52.68
Address 14455 N Hayden Rd	Purpose Domain Services			
City Scottsdale	State A	Zip Code Z 85260	Check Number PayPal	
To Whom Paid GoDaddy	M	D	Y	Amount
	0	8	1	13.17
Address 14455 N Hayden Rd	Purpose Domain Services			
City Scottsdale	State A	Zip Code Z 85260	Check Number PayPal	
To Whom Paid Jason Marshall	M	D	Y	Amount
	0	7	2	250.00
Address 3574 Whisper Creek Dr	Purpose Website Hosting and Admin Services			
City Columbus	State O	Zip Code H 43231	Check Number PayPal	

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Walter4Dublin												
To Whom Paid Constant Contact						M	D	Y	Amount			
						0	7	2	8	1	5	81.13
Address 1601 Trapelo Rd				Purpose Email Marketing								
City Waltham		State M A		Zip Code 02451		Check Number PayPal						
To Whom Paid						M	D	Y	Amount			
Address												
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address												
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address												
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address												
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address												
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address												
City		State		Zip Code		Check Number						