

BACKGROUND & SUMMARY INFORMATION

NAME Michael H. Keenan

STREET ADDRESS 7103 Coventry Woods Dr

CITY Dublin STATE Oh. ZIP CODE 43017

OFFICE SOUGHT Dublin City Council

NAME OF TREASURER Dennis B. Meadors

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)

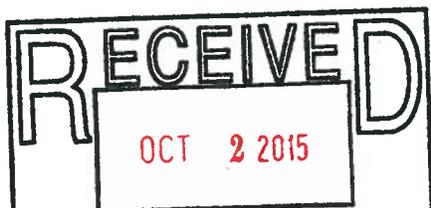
\$ 5,476.74

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

\$ _____

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

\$ 5,476.74



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: Michael H. Keenan

Date: 10-01-2015

Signature: _____

Statement of Contributions Received

Name of Candidate or Campaign Committee in Full							
Full Name of Contributor				Registration Number, if PAC			
Street Address		Street Address Continued			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Michael H. Keenan							
Michael H. Keenan							
7103 Coventry Woods Dr.					Check/Credit Card		
Dublin Ohio	Oh	43017	0	9	2	5	5,476.74
Full Name of Contributor				Registration Number, if PAC			
Street Address		Street Address Continued			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor				Registration Number, if PAC			
Street Address		Street Address Continued			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor				Registration Number, if PAC			
Street Address		Street Address Continued			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor				Registration Number, if PAC			
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City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor				Registration Number, if PAC			
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City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor				Registration Number, if PAC			
Street Address		Street Address Continued			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor				Registration Number, if PAC			
Street Address		Street Address Continued			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

Statement of Expenditures

Name of Candidate or Campaign Committee in Full											
Michael H. Keenan											
To Whom Paid						M	D	Y	Amount		
After Dark Graphics						0	19	2	15	1,550.82	
Address		Purpose			Check Number						
7373 Christie Chapel Rd.		Postcard, Threaded Web site design			3128						
City		State	Zip Code		Check Number						
Dublin		01h.	43019		3128						
To Whom Paid						M	D	Y	Amount		
OMG National Marketing						0	19	0	2	15	1,668.92
Address		Purpose			Check Number						
1801 N. Pine Island Rd. #200		Campaign Signs			3122						
City		State	Zip Code		Check Number						
Plantation Fla.		FL	33322		3122						
To Whom Paid						M	D	Y	Amount		
Columbus Dispatch						0	19	2	15	2,257.00	
Address		Purpose			Check Number						
P.O. Box 18253A		Campaign ads			VISA						
City		State	Zip Code		Check Number						
Columbus		01h.	43218-2537		VISA						
To Whom Paid						M	D	Y	Amount		
Address		Purpose			Check Number						
City		State	Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount		
Address		Purpose			Check Number						
City		State	Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount		
Address		Purpose			Check Number						
City		State	Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount		
Address		Purpose			Check Number						
City		State	Zip Code		Check Number						

Page Total \$ 5,476.74