



**Auditor of State  
Betty Montgomery**



**DEMOCRATIC POLITICAL PARTY  
LICKING COUNTY**

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## Auditor of State Betty Montgomery

### INDEPENDENT ACCOUNTANTS' REPORT ON APPLYING AGREED-UPON PROCEDURES

Secretary of State of Ohio  
Democratic Party Executive Committee  
Licking County  
35 South Park Place  
Newark, Ohio 43055

We have performed the procedures enumerated below, to which the Democratic Executive Committee agreed, solely to assist the Committee in evaluating its compliance with Ohio Rev. Code Sections 3517.1012, 3517.17, and 3517.18, for the year ended December 31, 2005. The Committee's Management is responsible for the Committee's compliance with those requirements. We followed the American Institute of Certified Public Accountants' attestation standards for agreed-upon procedures engagements. The sufficiency of the procedures is solely the responsibility of the Executive Committee. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose.

#### Cash Receipts

1. We inquired of management whether they deposited all gifts into the same fund into which they deposit amounts received from the State Tax Commissioner. They informed us they did not receive any such gifts.
2. We footed the *Statement of Political Party Restricted Fund Deposits* Ohio Rev. Code Section 3517.17 requires (Deposit Form 31-CC) for the year ended December 31, 2005.
3. We confirmed amounts received from the State Tax Commissioner pursuant to Ohio Rev. Code 3517.17(A), with the State of Ohio and agreed them to amounts shown on Deposit Form 31-CC. We found no exceptions.

#### Cash Reconciliation

1. We recomputed the mathematical accuracy of the reconciliation for the bank account used for receipts and disbursements restricted pursuant to Ohio Rev. Code Section 3517.1012(A). We found no computational errors.
2. We agreed the bank balance on the reconciliation to the bank statement balance as of December 31, 2005. The balances agreed.

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### Cash Disbursements

1. We footed the *Statement of Political Party Restricted Fund Disbursements* Ohio Rev. Code Section 3517.17 requires (Disbursement Form 31-M), for the year ended December 31, 2005.
2. For each disbursement on Disbursement Form 31-M, we traced the payee and amount to payee invoices and to the payee on canceled checks. The payees and amounts recorded on Disbursement Form 31-M agreed to the payees and amounts on the canceled checks.
3. We compared the signature on the check to the list dated February 28, 2003 of authorized signatories the Committee provided to us. The signatory on all checks we selected was an approved signatory. We compared the endorsement to the payee listed on the check without exception.
4. We compared the purpose of each disbursement listed on Disbursement Form 31-M to the purpose listed on the vendor invoice.

We found no instances where the purpose described on the invoice was inconsistent with the description on Disbursement Form 31-M.

We were not engaged to, and did not perform an examination, the objective of which would be the expression of an opinion on compliance of the *Statement of Political Party Restricted Fund Deposits* and the *Statement of Political Party Restricted Fund Disbursements* attached to this report. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that we would have reported to you.

This report is intended solely for the information and use of the Secretary of State of Ohio and for the Executive Committee and is not intended to be and should not be used by anyone else.



**Betty Montgomery**  
Auditor of State

March 14, 2006

# Statement of Political Party Restricted Fund Deposits

Prescribed by Secretary of State 3/05

Name of Committee in Full						
<b>Licking County Democratic Political Party Fund</b>						
Name of Donor				Registration Number, if PAC		
<b>Betty Montgomery, Auditor of State</b>						
Street Address						Form (Cash, Check, etc.)
<b>35 North Fourth Street</b>						<b>Check</b>
City	State	Zip Code	M	D	Y	Amount
<b>Columbus</b>	<b>OH</b>	<b>43215</b>	<b>0</b>	<b>3</b>	<b>2</b>	<b>\$22.00</b>
Name of Donor				Registration Number, if PAC		
<b>Betty Montgomery, Auditor of State</b>						
Street Address						Form (Cash, Check, etc.)
<b>35 North Fourth Street</b>						<b>Check</b>
City	State	Zip Code	M	D	Y	Amount
<b>Columbus</b>	<b>OH</b>	<b>43215</b>	<b>0</b>	<b>6</b>	<b>2</b>	<b>\$743.93</b>
Name of Donor				Registration Number, if PAC		
<b>Betty Montgomery, Auditor of State</b>						
Street Address						Form (Cash, Check, etc.)
<b>35 North Fourth Street</b>						<b>Check</b>
City	State	Zip Code	M	D	Y	Amount
<b>Columbus</b>	<b>OH</b>	<b>43215</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>\$540.61</b>
Name of Donor				Registration Number, if PAC		
<b>Betty Montgomery, Auditor of State</b>						
Street Address						Form (Cash, Check, etc.)
<b>35 North Fourth Street</b>						<b>Check</b>
City	State	Zip Code	M	D	Y	Amount
<b>Columbus</b>	<b>OH</b>	<b>43215</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>\$97.15</b>
Name of Donor				Registration Number, if PAC		
Street Address						Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
	<b>OH</b>					
Name of Donor				Registration Number, if PAC		
Street Address						Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
	<b>OH</b>					
Name of Donor				Registration Number, if PAC		
Street Address						Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
	<b>OH</b>					

Note: If committee received deposits from corporations or labor organizations, report must be filed electronically with secretary of state.

# Statement of Political Party Restricted Fund Disbursements

Prescribed by Secretary of State 03/05

Name of Committee in Full								
Licking County Democratic Political Party Fund								
To Whom Paid								
Bob Vila								
Address		Purpose (insert number from list below) <sup>1</sup>		M	D	Y	Amount	
29 West Chuch Street		1. Prty HQ - Rent		1	0	13	05	\$530.00
City	State	Zip Code						
Newark	OH	43055						
To Whom Paid								
Dawson, Coleman and Wallace								
Address		Purpose (insert number from list below) <sup>1</sup>		M	D	Y	Amount	
1967 Newark-Granville Road		1. Insurance		1	2	08	05	\$350.00
City	State	Zip Code						
Granville	OH	43023						
To Whom Paid								
Unizan Bank								
Address		Purpose (insert number from list below) <sup>1</sup>		M	D	Y	Amount	
42 North Third Street		1. Banking Fees		1	2	31	05	\$72.00
City	State	Zip Code						
Newark	OH	43055						
To Whom Paid								
Address		Purpose (insert number from list below) <sup>1</sup>		M	D	Y	Amount	
		Select a Purpose						
City	State	Zip Code						
	OH							
To Whom Paid								
Address		Purpose (insert number from list below) <sup>1</sup>		M	D	Y	Amount	
		Select a Purpose						
City	State	Zip Code						
	OH							
To Whom Paid								
Address		Purpose (insert number from list below) <sup>1</sup>		M	D	Y	Amount	
		Select a Purpose						
City	State	Zip Code						
	OH							

<sup>1</sup>R.C. 3517.18 limits the purposes for which monies from the Ohio Political Party Fund may be used. R.C. 3517.1012 limits the purposes for which monies from the Political Party Restricted Fund may be used. Designate in this block the relevant category number for each disbursement, as follows:

- 1) Political party headquarters operation costs including transfers to state party's Public Funds account;
- 2) Voter registration activities;
- 3) Get-out-the-vote activities;
- 4) Administration of political party fundraising (Separate office account required. Not for campaign related fundraising.);
- 5) Advertisements encouraging public support for income tax checkoff program;
- 6) Communications with registered voters not related to any particular candidate or election;
- 7) Preparation of reports required by law;

**Ohio Political Party Fund/Restricted Fund monies are prohibited from being used for certain purposes, including to further the election or defeat of any particular candidate or ballot issue. Copies of paid receipts or canceled checks for all expenditures of more than \$25 must be attached.**

*Note: If committee received deposits from corporations or labor organizations, report must be filed electronically with Secretary of State.*





**Auditor of State  
Betty Montgomery**

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**DEMOCRATIC PARTY**

**LICKING COUNTY**

**CLERK'S CERTIFICATION**

**This is a true and correct copy of the report which is required to be filed in the Office of the Auditor of State pursuant to Section 117.26, Revised Code, and which is filed in Columbus, Ohio.**

*Susan Babbitt*

**CLERK OF THE BUREAU**

**CERTIFIED  
APRIL 17, 2006**