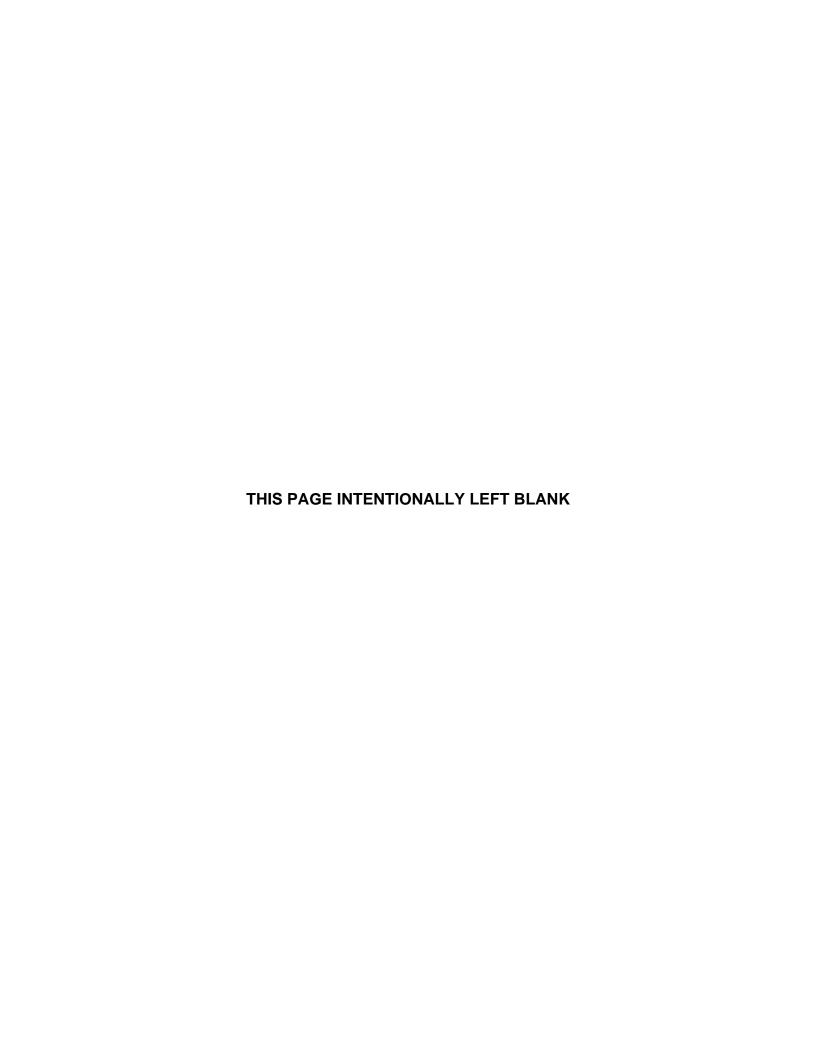




DEMOCRATIC POLITICAL PARTY ROSS COUNTY

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REPORT OF INDEPENDENT ACCOUNTANTS ON APPLYING AGREED-UPON PROCEDURES

Secretary of State of Ohio Democratic Executive Committee Ross County 280 East Main Street Chillicothe, OH 45601

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.
- We traced each donor amount from Deposit form 31-CC to bank deposits without exception. We noted Form 31-CC reported \$ 1.78 of interest earned on the checking account. The Ross County Democratic Executive Committee should report interest on Form 31-A-2, Statement of Other Income.

Cash Reconciliation

- 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.

Democratic Executive Committee Ross County Report of Independent Accountants on Applying Agreed-Upon Procedures Page 2

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 December 31, 2005 of authorized signatories the Committee provided to us. The signatory on all checks was an approved signatory.
- 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

Butty Montgomeny

Auditor of State

March 6, 2006

31-CC
R.C. 3517.1012

Statement of Political Party Restricted Fund Deposits

Prescribed by Secretary of State 3/05

Name of Committee in Full									
ROSS COUNTY DEMOCRATIC PART	Y RE	STRI	CTED FUND						
Name of Donor				Regi	stration	1 Nun	iber, if PA	AC	
Consolidated Warrant Fund Ohio Polit	cal P	arty							
Street Address								Form (Cash, Ch	eck, etc.)
State of Ohio								Check	
City	St	tate	Zip Code	M		D	Y	Amount	
Columbus	0	Н	43216	0	2 0	9	0 5		1.76
Name of Donor				Regi	stration	n Nun	nber, if PA	AC	
Citizens National Bank									
Street Address				· <u>=</u>				Form (Cash, Ch	eck, etc.)
33 W. Main St.								Interest	
City	St	tate	Zip Code	M		D	Y	Amount	
Chillicothe	O	H	45601	1	2 3	1	$0 \mid 4$		0.45
Name of Donor							ber, if PA	AC	
Consolidated Warrant Fund Ohio Polit	cal P	artv							
Street Address		<u>J</u>						Form (Cash, Ch	eck, etc.)
State of Ohio								Check	
City	St	tate	Zip Code	М		D	Y	Amount	
Columbus	0	Н	43216	0	4 2	9	0 5		262.53
Name of Donor			10210	•			nber, if PA	AC	202.00
Citizens National Bank							ŕ		
Street Address								Form (Cash, Ch	eck, etc.)
33 W. Main St.				Interest					
City	St	tate	Zip Code	M		D	Y	Amount	
Chillicothe	O	H	45601		4 2		0 5	· ·········	0.45
Name of Donor	O		45001	_			ber, if PA	AC	0.40
Citizens National Bank				Regi	stration	1 I Vuii	1001, 11 1 2	ic	
Street Address								Form (Cash, Ch	ack atc.)
								_ ` `	
33 W. Main St.	Ç,	tate	Zip Code	М	-	D	Y	Interest Amount	
Chillicothe	\bigcap^{3}	H	45601					Amount	0.40
Name of Donor	U	11	40001		6 3		ober, if PA	VC	0.40
Consolidated Warrant Fund Ohio Polit	1 D	outre		Regi	stration	1 I VUII	1001, 11 1 7	ic	
Street Address	Cal F	arty						Form (Cash, Ch	andr ata
State of Ohio								, ,	eck, etc.)
City	Ç,	tate	Zip Code	M		D	Y	Check Amount	
Columbus	_	H	43216						141.54
Name of Donor	O	11	43210	U Dani	/ Z	. I	0 5	V.C.	141.54
				Regi	stratioi	1 INUII	iber, ii P	AC .	
Citizens National Bank								E (C1- Cl-	14- \
Street Address								Form (Cash, Ch	
33 W. Main St.	0.		7: 0 1			<u> </u>	37	Interest	
City	_	tate	Zip Code	M		D	Y	Amount	0.40
Chillicothe	O	Н	45601		9 3				0.48
Name of Donor	1.15			Regi	stratioi	1 Nun	iber, if PA	AC	
Consolidated Warrant Fund Ohio Polit	cai P	arty							
Street Address								Form (Cash, Ch	eck, etc.)
State of Ohio			1					Check	
City	_	tate	Zip Code	М		D	Y	Amount	
Columbus	O	Н	43216	1	0 2	0	0 5		24.16

 $Note: If committee \ received \ deposits \ from \ corporations \ or \ labor \ or ganizations, \ report \ must \ be \ filled \ electronically \ with \ secretary \ of \ state.$

Page Total \$	431.77	

Page	4	
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Statement of Political Party Restricted Fund Disbursments

Prescribed by Secretary of State 3/05

Name of Committee in Full							
ROSS COUNTY DEMOCRAT	IC P∆RTV	RESTRICTED ELIND					
To Whom Paid	IC I ANI I	RESTRICTED FUND					
Ross County Agricultural Soci	otv						
Address	ety	Purpose (insert number from list	M	D	Y	Amount	
PO Box 614		below) 1 6		$0 \mid 2$			405.00
City	State	Zip Code	U	0 0 2	0 3		405.00
Chillicothe	O H	45601					
To Whom Paid	0 11	43001					
Citizens National Bank (charg	a for cachie	or's check)					
Address	e for castin	Purpose (insert number from list	M	D	Y	Amount	
33 W. Main St.		below) 1 6		$\begin{bmatrix} 2 \\ 8 \end{bmatrix}$			3.00
City	State	Zip Code	0 4	2 0	UJ		5.00
Chillicothe	ОН	45601					
To Whom Paid	0 11	10001					
Address		Purpose (insert number from list	M	D	Y	Amount	
		below) 1					
City	State	Zip Code					
•							
To Whom Paid							
Address		Purpose (insert number from list	M	D	Y	Amount	
		below) 1					
City	State	Zip Code					
To Whom Paid							
Address		Purpose (insert number from list	M	D	Y	Amount	
		below) 1					
City	State	Zip Code					
To Whom Paid							
Address		Purpose (insert number from list	M	D	Y	Amount	
		below) 1					
City	State	Zip Code					

- 1 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 purpose 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 /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 cancelled 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.



88 East Broad Street P.O. Box 1140 Columbus, Ohio 43216-1140

Telephone 614-466-4514

800-282-0370

Facsimile 614-466-4490

ROSS COUNTY DEMOCRATIC PARTY ROSS 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.

CLERK OF THE BUREAU

Susan Babbitt

CERTIFIED APRIL 13, 2006