		ON/AMENDMENT NDIDATE/OFFICE		IT FOR	FORM	I COR-C/OH	
1 ACCOUNT#		2 Total Pages filed:				OFFICE USE ONLY	
CANDIDATE /	MS/MRS/MR	FIRST	MI		Date Received		
OFFICEHOLDER	Dr.	Benjamin	L.		12/4/2015		
NAME	NICKNAME	LAST	SUF	FIX	1		
	Ben Hall	Hall	III				
4 ORIGINAL					Date Hand-delivere	d or Date Postmarked	
REPORT	January 15	Runoff	Other (Specify)				
TYPE	🖰		J				
	July 15	Exceeded \$500 limit			Receipt #	Amount	
	30th day before election	n 15th day after treasurer appointment(Officeholder only)			Legal	Totals	
	X 8th da before election	Final report			Date Processed		
5 ORIGINAL PERIOD	Month Da	ay Year	Month Da	y Year	Date Imaged		
COVERED	7/1/2	2015 THROUGH	9/24/2	2015			
6 EXPLANATION OF	CORRECTION		,				
this report. This report is 7 AFFIDAVIT	o bomig mod to rone	ot the composed totale.				_	
		I swear, or affirm, unde Check ONLY if applicabl Semiannual reports: This after September 1, 2011 original report was filed, without an intent to misle X Other reports (excluding affirm, that I am filing this learned that the report as error or omission in the re	e: s report is an amend . If amendment/cori I swear, or affirm, the ad or to misreprese semiannual reports s corrected report n s originally filed is ir eport as originally f	dment/correction rection is filed or hat the original rent the information of later than the naccurate or incolled was made in enjamin L. Hall,	n to a semiannua n or after the eigleport was made on contained in the September 1, 2 14th business domplete. I swear n good faith.	al report due on or onth day after the in good faith and he report. 011): I swear, or ay after the date I	
			Signature o	of Candidate or 0	Officeholder		
AFFIX NOT STAMP / SEAL A			41	:- 41		da	
		, this the, to certify which, witness my hand and seal of office.				day	
OI	, ZU ;	, to certify which, withess r	ny nand and se	ai of office.			
Signature of officer adm	ninistering oath	Print name of officer administering oath Title of officer administering oath					
Ren		ch Any Part Of The (port Form		