

## **Ohio Campaign Finance Report**

Form 30-A

2019 FEB 15 PM 3: 10

ORC 3517.10

Citizens for Beryl D. Anders	Office Sought	District
947 E. Johnstown Rd #188 City Caha	INA OH Zip 43230	
Candidate Name OR PAC Registration Number Treasurer Name  Beryl D. Anderson Deputy Trea	surer Beryl D. Anderson	D/YYYY)
Type of Report (choose one):		
Annual Semiannual Pre-Primary Post-Primary	y Pre-General Post-General	
Statewide Candidates Only: N	1	ear
☐ July Monthly ☐ August Monthly ☐ September Monthly		2018
Amended Report Termination N/A Sho	ort Form Report (R.C. 3517.10(H))	
No Pes Check this box if the committee wishes to terminate with this report	Check this box if the committee is filing a short term report. See attached instructions.	
1. Amount brought forward from last report	11.32	
2. Total monetary contributions (From Forms 31-A and 31-E)	$\mathcal{D}$	
3. Total other income (From Form 31-A-2)	0	
4. Total funds available (sum of lines 1, 2, 3)	11,32	
5. Total monetary expenditures (From Forms 31-B and 31-F)	U	
6. Balance on hand (line 4 minus line 5)	11,32	
7. Value of in-kind contributions received (From Form 31-J-1)	$\mathcal{U}$	
8. Value of in-kind contributions made (From Form 31-J-2)	$\mathcal{O}_{\mathcal{O}}$	
9. Outstanding loans owed by committee (From Form 31-C)	U	
10. Outstanding debts owed by committee (From Form 31-N)	Ó	
11. Outstanding loans owed to committee (From Form 31-K)	0	
12. Value of independent expenditures made (From Form 31-U	0	
THIS STATEMENT IS MADE UNDER PENALTY OF ELECTION WHO EVER COMMITS ELECTION FALSIFICATION IS GUILTY OF	FALSIFICATION.  OF A FELONY OF THE FIFTH DEGREE.	<u>_</u>
Signature of Treasurer or Deputy Treasurer	why Treasurer 2/11/2019 Date (MM/DD/YYYY)	
	,	
Contribution Pages   Expenditure Pages   Other Page	Last Upda	ated 09/201