Ohio Campaign Finance Report

		riescribed by Secret	ary or state 3/03			
			11		11:1.2	
Full Name of Committee			Registration Number, if PAC			
Citizens to Elect McDonald			FRANKLIN COUNTY			
Full Name of Candidate Gary D. McDonald			BOARD OF ELECTIONS			
Street Address			Office Sought		District	
3781 Clearwater Drive			Madison 1	Madison Township Trustee Madison Township		
City				State	Zip Code	
Columbus				OH _.	43232	
Type of Report	Pro-Primary	Post-Primary	Pre-General	Post-Gene	Annual Year	
(place X to the left of report type)	July Monthly	August Monthly	September Monthly	■ Terminati	on Semiannual	
Amended Report?	No Report Electronically	Filed? Tes To No	Date of Election	1 1 1	0 8 1 1	

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box D No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$ \$0	.00
2. Total monetary contributions (From Form No. 31-A)	s \$0	.00
3. Total other income (From Form No. 31-A-2)	s \$0	.00
4. Total funds available (sum of lines 1, 2, 3)	s \$0	.00
5. Total monetary expenditures (From Form No. 31-B)	s \$0	.00
6. Balance on hand (line 4 minus line 5)	s \$0	.00
7. Value of in-kind contributions received (From Form No. 31-J-1)	s \$0	.00
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$ \$0	.00
9. Outstanding loans owed by committee (From Form No. 31-C)	s \$0	.00
10. Outstanding debts owed by committee (From Form No. 31-N)	s \$0	.00
11. Outstanding loans owed to committee (From Form No. 31-K)	s \$0	.00
12. Value of independent expenditures made (From Form No. 31-U)	s .\$0	.00
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	s	

	D IN THIS REPORT IS MADE UNDER THE PEN A FELONY OF THE FIFTH DEGREE.	ALTY OF ELECTION FALSIFICATION, WI	OEVER COMMITS ELECTION
Cindy Gussler (Trea	isurer)	Cindus Lymes >	
Print Name and Title (Treasurer and D	eputy Treasurer only) Signature	y , 00000	Date
Contribution	Expenditure	Other O	Total