## **Ohio Campaign Finance Report**



| -                                                                         |                                                                                                                                                | Prescribed by Secret | ary of State 3 | 3/05                 |         | 09                                                   | NOV                      | 15 | AM 8: :          |  |
|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------|----------------------|---------|------------------------------------------------------|--------------------------|----|------------------|--|
| Full Name of Committee  Citizens for Anne Gonzales Full Name of Candidate |                                                                                                                                                |                      |                |                      |         | Registration Number, if PAC COUNTY BOARD OF ELECTION |                          |    |                  |  |
|                                                                           | Gonzales                                                                                                                                       |                      |                |                      |         |                                                      |                          |    |                  |  |
| Street Address                                                            |                                                                                                                                                |                      |                | Office Sought        |         | District                                             |                          |    |                  |  |
| 570 Po<br>City                                                            | City Council                                                                                                                                   |                      | ite Zi         | p Code               |         | <del></del>                                          |                          |    |                  |  |
| Wester                                                                    |                                                                                                                                                | OH                   |                | -                    | 43081   |                                                      |                          |    |                  |  |
| Type of Report<br>(place X to the left of report<br>type)                 | Pre-Primary Post-Primary                                                                                                                       |                      |                | Pre-General          | X       | Post-Genera                                          | al                       | Ar | mual Year        |  |
|                                                                           | July<br>Monthly                                                                                                                                | August<br>Monthly    |                | September<br>Monthly |         | Termination                                          | 1                        | Se | miannual         |  |
| Amended Report?                                                           | X No Report Electronically F                                                                                                                   | iled? 🔲 Yes 🛣 No     | Date of        | Election             | 1       | 1                                                    | o <sup>D</sup> 3         | 3  | 0 <sup>Y</sup> 9 |  |
| NO other forms are required for                                           | a post-primary or post-general per                                                                                                             |                      | iee R.C. 351   |                      | -       |                                                      |                          |    |                  |  |
|                                                                           | Amount brought forward from last report     Total monetary contributions (From Form No. 31-A)                                                  |                      |                | \$ 3,895             |         | .00                                                  |                          |    |                  |  |
|                                                                           |                                                                                                                                                |                      |                | s 5 !                | 55      |                                                      |                          |    |                  |  |
|                                                                           | 3. Total other income (From Form No. 31-A-2)                                                                                                   |                      |                | \$                   | )       | .00                                                  |                          |    |                  |  |
|                                                                           | 4. Total funds available (sum of lines 1, 2, 3)  5. Total monetary expenditures (From Form No. 31-B)  6. Balance on hand (line 4 minus line 5) |                      |                | s 3,950              | )       | 00                                                   |                          |    |                  |  |
|                                                                           |                                                                                                                                                |                      |                | \$ 3,950             | 950 .00 |                                                      |                          |    |                  |  |
|                                                                           |                                                                                                                                                |                      |                | \$                   |         |                                                      |                          |    |                  |  |
|                                                                           | 7. Value of in-kind contributions received (From Form No. 31-J-1)                                                                              |                      |                | \$                   |         |                                                      |                          |    |                  |  |
|                                                                           | 8. Value of in-kind contributions made (From Form No. 31-J-2)                                                                                  |                      |                | \$                   |         |                                                      |                          |    |                  |  |
|                                                                           | 9. Outstanding loans owed by committee (From Form No. 31-C)                                                                                    |                      |                | \$                   |         |                                                      |                          |    |                  |  |
|                                                                           | 10. Outstanding debts owed by committee (From Form No. 31-N)                                                                                   |                      |                | \$                   |         |                                                      |                          |    |                  |  |
|                                                                           | 11. Outstanding loans owed to committee (From Form No. 31-K)                                                                                   |                      |                | \$                   |         | ·                                                    |                          |    |                  |  |
| 12. Value of independent expenditures made (From Form No. 31-U)           |                                                                                                                                                |                      |                | \$                   |         |                                                      |                          |    |                  |  |
|                                                                           | 13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period. \$                                |                      |                |                      |         |                                                      |                          |    |                  |  |
| ALSIFICATION IS GUILTY                                                    | AINED IN THIS REPORT IS MY OF A FELONY OF THE FIFT ATOME, Treasurer and Deputy Treasurer only)                                                 | TH DEGREE.           | OF ELEC        | TION FALSIFICATION   | N. WHO  | 11/                                                  | MITS EL<br>09/20<br>Date |    | <b>ON</b>        |  |
| Contribution pages 1                                                      | Expenditur<br>pag                                                                                                                              |                      | 1              | her<br>ages 0        |         |                                                      | Tota                     |    | 2                |  |