Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

2017 JAN 26 PM 2:58

Full Name of Committee REYNOLDSBU	RG AREA DEN	OCRATS PAC	Registration Number, if PAC		
Full Name of Candidate REYNOLDSBUR	RG AREA DEMO	OCRAT CANDIDATE	S	And the second s	
Street Address CHEYENNE WAY 8334 PRIESTLEY DR.			Office Sought STATE RI	Office Sought STATE REPRESENTATIVE 71	
City REYNOLDSBU	RG			State Zip (Code 43068
Type of Report	Pre-Primary	Post-Primary	Pre-General	Post-General	Annual Year
(place X to the left of report type)	July Monthly	August Monthly	September Monthly	Termination	Semiannual
Amended Report? Yes No Report Electronically Filed? Tyes No			Date of Election	1 ^M 1 0	B 1 6

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 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.

Amount brought forward from last report	s \$0	.00
2. Total monetary contributions (From Form No. 31-A)	s \$440	.00
3. Total other income (From Form No. 31-A-2)	s	
4. Total funds available (sum of lines 1, 2, 3)	s \$440	.00
5. Total monetary expenditures (From Form No. 31-B)	s \$250	.00
6. Balance on hand (line 4 minus line 5)	s \$190	.00
7. Value of in-kind contributions received (From Form No. 31-J-1)	s \$806	.16
8. Value of in-kind contributions made (From Form No. 31-J-2)	S	-
9. Outstanding loans owed by committee (From Form No. 31-C)	s	
10. Outstanding debts owed by committee (From Form No. 31-N)	s	
11. Outstanding loans owed to committee (From Form No. 31-K)	s	
12. Value of independent expenditures made (From Form No. 31-U)	s	
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	s	

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

JAMES H SMITH,	TREASURER
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Print Name and Title (Treasurer and Deputy Treasurer only)

01-26-17

Date

Contribution pages______

Expenditure 1 pages_____

Other 1 pages____

Total 3 pages_