

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3.05

Full Name of Committee <b>Committee to Elect Veronica Sims</b>							Registration Number, if PAC		
Full Name of Candidate <b>Veronica Ruth Sims</b>									
Street Address <b>396 Briarwood Drive</b>					Office Sought <b>City Council - AT - Large</b>			District	
City <b>Akron</b>					State <b>O H</b>		Zip Code <b>44320</b>		
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General		Annual Year
	July Monthly		August Monthly		September Monthly		Termination		<b>2016</b> Semiannual
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date of Election		M <b>1 1</b>	D <b>0 3</b>	Y <b>1 5</b>	

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 at 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	\$	400.38
2. Total monetary contributions (From Form No. 31-A)	\$	800.00
3. Total other income (From Form No. 31-A-2)	\$	910.75
4. Total funds available (sum of lines 1, 2, 3)	\$	2,111.13
5. Total monetary expenditures (From Form No. 31-B)	\$	1,883.75
6. Balance on hand (line 4 minus line 5)	\$	227.38
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	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)	\$	3,710.75
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	42.70
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	0.00
12. Value of independent expenditures made (From Form No. 31-U)	\$	0.00
13. For Electronic Filing Entities only	\$	
Sum of lines 2, 7 and amount of any new loans received this period	\$	

**OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS**

2017 JAN 31 PM 1:57  
SUMMIT COUNTY  
BOARD OF ELECTIONS  
AKRON, OHIO  
#6790

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

Veronica R Sims *Veronica R Sims* 1/31/17  
Print Name and Title (Treasurer and Deputy Treasurer only) Signature Date

Contribution pages <u>1</u>	Expenditure pages <u>2</u>	Other pages <u>8</u>	Total pages <u>11</u>
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# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Committee To Elect Veronica Sims</b>							
Full Name of Contributor <b>Realtors Political Action Committee</b>					Registration Number, if PAC		
Street Address <b>200 E. Town Street</b>		Employer/Occupation/Labor Organization* <b>PAC</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O H</b>	Zip Code <b>43215</b>	M <b>1</b>	D <b>2</b>	Y <b>15</b>	Amount <b>750.00</b>	
Full Name of Contributor <b>Summit County Federated Democratic Women</b>					Registration Number, if PAC		
Street Address <b>82 Cedar Wood Drive</b>		Employer/Occupation/Labor Organization* <b>PAC</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Cuyahoga Falls</b>	State <b>O H</b>	Zip Code <b>44223</b>	M <b>1</b>	D <b>2</b>	Y <b>15</b>	Amount <b>50.00</b>	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

# Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Committee to Elect Veronica Sims</b>							Registration Number, if PAC											
Full Name				M			D			Y			Amount					
Address				Type*														
City				State			Zip Code			Form(Cash,Check,etc)								
Full Name <b>Veronica Sims</b>							Registration Number, if PAC											
Address 396 Briarwood Drive				Type* L   N			M 0 4			D 1 4			Y 1 6			Amount 200.00		
City Akron				State O   H			Zip Code 44320			Form(Cash,Check,etc) Check								
Full Name <b>Quintin &amp; Veronica Sims</b>							Registration Number, if PAC											
Address 396 Briarwood Drive				Type* L   N			M 0 5			D 0 5			Y 1 6			Amount 200.00		
City Akron				State O   H			Zip Code 44320			Form(Cash,Check,etc) Check								
Full Name <b>Quintin &amp; Veronica Sims</b>							Registration Number, if PAC											
Address 396 Briarwood Drive				Type* L   N			M 0 6			D 0 9			Y 1 6			Amount 100.00		
City Akron				State O   H			Zip Code 44320			Form(Cash,Check,etc) Check								
Full Name <b>Quintin &amp; Veronica Sims</b>							Registration Number, if PAC											
Address 396 Briarwood Drive				Type* L   N			M 0 7			D 0 6			Y 1 6			Amount 100.00		
City Akron				State O   H			Zip Code 44320			Form(Cash,Check,etc) Check								
Full Name <b>Quintin &amp; Veronica Sims</b>							Registration Number, if PAC											
Address 396 Briarwood Drive				Type* L   N			M 0 8			D 0 5			Y 1 6			Amount 100.00		
City Akron				State O   H			Zip Code 44320			Form(Cash,Check,etc) Check								
Full Name <b>Quintin &amp; Veronica Sims</b>							Registration Number, if PAC											
Address 396 Briarwood Drive				Type* L   N			M 0 8			D 2 9			Y 1 6			Amount 210.75		
City Akron				State O   H			Zip Code 44320			Form(Cash,Check,etc) Check								
Full Name							Registration Number, if PAC											
Address				Type*			M			D			Y			Amount		
City				State			Zip Code			Form(Cash,Check,etc)								

\* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received, RE for a refund, uncashed check or the committee's own insufficient funds check received, place the letters IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full												
<b>Committee to Elect Veronica Sims</b>												
To Whom Paid						M	D	Y	Amount			
Emilia Sykes Campaign						1	2	0	7	1	5	75.00
Address			Purpose									
109 N. Howard Street Unit #A			Contribution									
City		State	Zip Code	Check Number								
Akron		O   H	44308	1103								
To Whom Paid						M	D	Y	Amount			
Summit County Federated Democratic Woman						1	2	0	7	1	5	14.00
Address			Purpose									
24 South Portage Path #C			Monthly Lunch Meeting									
City		State	Zip Code	Check Number								
Akron		O   H	44313	1104								
To Whom Paid						M	D	Y	Amount			
Graffiti Print Shop						1	2	1	7	1	5	750.00
Address			Purpose									
739 North Main Street			Debt Payment									
City		State	Zip Code	Check Number								
Akron		O   H	44310	1105								
To Whom Paid						M	D	Y	Amount			
Bob Keith						0	1	2	6	1	6	20.00
Address			Purpose									
166 S. High Street			State of the City Luncheon/Meeting									
City		State	Zip Code	Check Number								
Akron		O   H	44308	1106								
To Whom Paid						M	D	Y	Amount			
Summit County Federated Democratic Woman						0	1	1	9	1	6	14.00
Address			Purpose									
24 South Portage Path #C			Monthly Lunch Meeting									
City		State	Zip Code	Check Number								
Akron		O   H	44313	1107								
To Whom Paid						M	D	Y	Amount			
Committee to Elect Judith Lynn Lee						0	2	2	6	1	6	25.00
Address			Purpose									
3227 Creekside Drive			Contribution									
City		State	Zip Code	Check Number								
Norton		O   H	44203	1121								
To Whom Paid						M	D	Y	Amount			
Emilia Sykes Committee						0	3	0	4	1	6	50.00
Address			Purpose									
109 N. Howard Street Unit #A			Contribution									
City		State	Zip Code	Check Number								
Akron		O   H	44308	1108								
To Whom Paid						M	D	Y	Amount			
Graffiti Print Shop						0	4	1	8	1	6	200.00
Address			Purpose									
739 North Main Street			Debt Payment									
City		State	Zip Code	Check Number								
Akron		O   H	44310	1109								

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Committee to Elect Veronica Sims</b>												
To Whom Paid <b>Providence Baptist Church</b>						M	D	Y	Amount			
						0	4	1	8	1	6	25.00
Address <b>458 Madison Avenue</b>				Purpose <b>Scholarship Breakfast</b>								
City <b>Akron</b>		State <b>O</b>	H	Zip Code <b>44320</b>		Check Number <b>1110</b>						
To Whom Paid <b>Graffiti Print Shop</b>						M	D	Y	Amount			
						0	5	1	0	1	6	200.00
Address <b>739 N. Main Street</b>				Purpose <b>Debt Payment</b>								
City <b>Akron</b>		State <b>O</b>	H	Zip Code <b>44310</b>		Check Number <b>1111</b>						
To Whom Paid <b>Graffiti Print Shop</b>						M	D	Y	Amount			
						0	6	1	3	1	6	100.00
Address <b>739 N. Main Street</b>				Purpose <b>Debt Payment</b>								
City <b>Akron</b>		State <b>O</b>	H	Zip Code <b>44310</b>		Check Number <b>1112</b>						
To Whom Paid <b>Graffiti Print Shop</b>						M	D	Y	Amount			
						0	7	0	8	1	6	100.00
Address <b>739 N. Main Street</b>				Purpose <b>Debt Payment</b>								
City <b>Akron</b>		State <b>O</b>	H	Zip Code <b>44310</b>		Check Number <b>1113</b>						
To Whom Paid <b>Graffiti Print Shop</b>						M	D	Y	Amount			
						0	8	1	5	1	6	100.00
Address <b>739 N. Main Street</b>				Purpose <b>Debt Payment</b>								
City <b>Akron</b>		State <b>O</b>	H	Zip Code <b>44310</b>		Check Number <b>1114</b>						
To Whom Paid <b>Graffiti Print Shop</b>						M	D	Y	Amount			
						0	8	2	9	1	6	210.75
Address <b>739 N. Main Street</b>				Purpose <b>Debt Payment</b>								
City <b>Akron</b>		State <b>O</b>	H	Zip Code <b>44310</b>		Check Number <b>1115</b>						
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City		State	H	Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City		State	H	Zip Code		Check Number						

# Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Committee to Elect Veronica Sims</b>												
From Whom Received <b>Quintin and Veronica Sims</b>								Prior Amount <b>\$0.00</b>		Amt. Incurred this Period <b>\$2,000.00</b>		
Address <b>396 Briarwood Drive</b>										Outstanding Balance <b>\$2,000.00</b>		
City <b>Akron</b>		St. ate <b>OH</b>		Zip Code <b>44320</b>		Loans Received This Period Date			Payments This Period Date			
						Amount			Amount			
Date Loan was originally Incurred		M D Y		M D Y		\$			\$			
		0 8 2 4 1 5		0 8 2 4 1 5		\$2,000.00			\$0.00			
Registration Number, if PAC								M D Y		M D Y		
Employer/Occupation/Labor Organization*								M D Y		M D Y		
From Whom Received <b>Quintin and Veronica Sims</b>								Prior Amount <b>\$2,000.00</b>		Amt. Incurred this Period <b>\$800.00</b>		
Address <b>396 Briarwood Drive</b>										Outstanding Balance <b>\$2,800.00</b>		
City <b>Akron</b>		St. ate <b>OH</b>		Zip Code <b>44320</b>		Loans Received This Period Date			Payments This Period Date			
						Amount			Amount			
Date Loan was originally Incurred		M D Y		M D Y		\$			\$			
		1 2 1 5 1 5		1 2 1 2 1 5		\$800.00			\$0.00			
Registration Number, if PAC								M D Y		M D Y		
Employer/Occupation/Labor Organization*								M D Y		M D Y		
From Whom Received <b>Quintin and Veronica Sims</b>								Prior Amount <b>\$2,800.00</b>		Amt. Incurred this Period <b>\$200.00</b>		
Address <b>396 Briarwood Drive</b>										Outstanding Balance <b>\$3,000.00</b>		
City <b>Akron</b>		St. ate <b>OH</b>		Zip Code <b>44320</b>		Loans Received This Period Date			Payments This Period Date			
						Amount			Amount			
Date Loan was originally Incurred		M D Y		M D Y		\$			\$			
		0 4 1 4 1 6		0 4 1 4 1 6		\$200.00			\$0.00			
Registration Number, if PAC								M D Y		M D Y		
Employer/Occupation/Labor Organization*								M D Y		M D Y		

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 31-A-2). Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Outstanding Balance to the Cover page (Form No. 30-A).

<sup>1</sup> Total prior amount \$ \$4,800.00

<sup>2</sup> Total received this period \$ \$3,000.00 (To Form No. 31-A-2)

<sup>3</sup> Total payments this period \$ \$0.00 (To Form No. 31-B)

<sup>4</sup> Total Outstanding Balance \$ \$7,800.00 (To Form No. 30-A)

# Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Committee to Elect Veronica Sims</b>													
From Whom Received <b>Quintin and Veronica Sims</b>								Prior Amount <b>\$3,000.00</b>		Amt. Incurred this Period <b>\$200.00</b>			
Address <b>396 Briarwood Drive</b>										Outstanding Balance <b>\$3,200.00</b>			
City <b>Akron</b>		St ate <b>OH</b>	Zip Code <b>44320</b>		Loans Received This Period				Payments This Period				
					Date		Amount		Date		Amount		
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$	
<b>0 5 0 5 1 6</b>		<b>0</b>	<b>5</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>5</b>	<b>1</b>	<b>6</b>	<b>\$200.00</b>			<b>\$0.00</b>
Registration Number, if PAC								M	D	Y			
Employer/Occupation/Labor Organization*								M	D	Y			
From Whom Received <b>Quintin and Veronica Sims</b>								Prior Amount <b>\$3,200.00</b>		Amt. Incurred this Period <b>\$100.00</b>			
Address <b>396 Briarwood Drive</b>										Outstanding Balance <b>\$3,300.00</b>			
City <b>Akron</b>		St ate <b>OH</b>	Zip Code <b>44320</b>		Loans Received This Period				Payments This Period				
					Date		Amount		Date		Amount		
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$	
<b>0 6 0 9 1 6</b>		<b>0</b>	<b>6</b>	<b>0</b>	<b>9</b>	<b>1</b>	<b>6</b>	<b>\$100.00</b>				<b>\$0.00</b>	
Registration Number, if PAC								M	D	Y			
Employer/Occupation/Labor Organization*								M	D	Y			
From Whom Received <b>Quintin and Veronica Sims</b>								Prior Amount <b>\$3,300.00</b>		Amt. Incurred this Period <b>\$100.00</b>			
Address <b>396 Briarwood Drive</b>										Outstanding Balance <b>\$3,400.00</b>			
City <b>Akron</b>		St ate <b>OH</b>	Zip Code <b>44320</b>		Loans Received This Period				Payments This Period				
					Date		Amount		Date		Amount		
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$	
<b>0 7 0 6 1 6</b>		<b>0</b>	<b>7</b>	<b>0</b>	<b>6</b>	<b>1</b>	<b>6</b>	<b>\$100.00</b>				<b>\$0.00</b>	
Registration Number, if PAC								M	D	Y			
Employer/Occupation/Labor Organization*								M	D	Y			

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 31-A-2). Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Outstanding Balance to the Cover page (Form No. 30-A).

- <sup>1</sup> Total prior amount \$           \$9,500.00
- <sup>2</sup> Total received this period \$           \$400.00           (To Form No. 31-A-2)
- <sup>3</sup> Total payments this period \$           \$0.00           (To Form No. 31-B)
- <sup>4</sup> Total Outstanding Balance \$           \$9,900.00           (To Form No. 30-A)

# Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Committee to Elect Veronica Sims</b>															
From Whom Received <b>Quintin and Veronica Sims</b>								Prior Amount <b>\$3,400.00</b>		Amt. Incurred this Period <b>\$100.00</b>					
Address <b>396 Briarwood Drive</b>										Outstanding Balance <b>\$3,500.00</b>					
City <b>Akron</b>		St ate <b>OH</b>		Zip Code <b>44320</b>		Loans Received This Period Date Amount			Payments This Period Date Amount						
Date Loan was originally Incurred		M D		Y		M D Y \$			M D Y \$						
		0 8		0 5		1 6		0 8 0 5 1 6			\$100.00		\$0.00		
Registration Number, if PAC								M		D		Y			
Employer/Occupation/Labor Organization*								M		D		Y			
From Whom Received <b>Quintin and Veronica Sims</b>								Prior Amount <b>\$3,500.00</b>		Amt. Incurred this Period <b>\$210.75</b>					
Address <b>396 Briarwood Drive</b>										Outstanding Balance <b>\$3,710.75</b>					
City <b>Akron</b>		St ate <b>OH</b>		Zip Code <b>44320</b>		Loans Received This Period Date Amount			Payments This Period Date Amount						
Date Loan was originally Incurred		M D		Y		M D Y \$			M D Y \$						
		0 8		2 9		1 6		0 8 2 9 1 6			\$210.75		\$0.00		
Registration Number, if PAC								M		D		Y			
Employer/Occupation/Labor Organization*								M		D		Y			
From Whom Received								Prior Amount		Amt. Incurred this Period					
Address										Outstanding Balance					
City		St ate		Zip Code		Loans Received This Period Date Amount			Payments This Period Date Amount						
Date Loan was originally Incurred		M D		Y		M D Y \$			M D Y \$						
									\$0.00						
Registration Number, if PAC								M		D		Y			
Employer/Occupation/Labor Organization*								M		D		Y			

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 31-A-2). Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Outstanding Balance to the Cover page (Form No. 30-A).

- <sup>1</sup> Total prior amount \$         \$6,900.00
- <sup>2</sup> Total received this period \$         \$310.75         (To Form No. 31-A-2)
- <sup>3</sup> Total payments this period \$         \$0.00         (To Form No. 31-B)
- <sup>4</sup> Total Outstanding Balance \$         \$7,210.75         (To Form No. 30-A)



# Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee <b>Committee to Elect Veronica Sims</b>										
To Whom Owed <b>Graffiti Print Shop</b>						Prior Amount <b>1,703.45</b>			Amt. Incurred this Period <b>0.00</b>	
Address <b>739 North Main Street</b>						Item or Purpose for Debt <b>Yard Signs</b>			Outstanding Balance <b>953.45</b>	
City <b>Akron</b>				State <b>OH</b>		Zip Code <b>44310</b>		Payments Made This Period		
								Date <b>1 2 1 7 1 5</b>		
								Amount <b>750.00</b>		
Date Debt was originally Incurred										
Registration Number, if PAC										
To Whom Owed <b>Graffiti Print Shop</b>						Prior Amount <b>953.45</b>			Amt. Incurred this Period <b>0.00</b>	
Address <b>739 North Main Street</b>						Item or Purpose for Debt <b>Yard Signs</b>			Outstanding Balance <b>753.45</b>	
City <b>Akron</b>				State <b>OH</b>		Zip Code <b>44310</b>		Payments Made This Period		
								Date <b>0 4 1 8 1 6</b>		
								Amount <b>200.00</b>		
Date Debt was originally Incurred										
Registration Number, if PAC										
To Whom Owed <b>Graffiti Print Shop</b>						Prior Amount <b>753.45</b>			Amt. Incurred this Period <b>0.00</b>	
Address <b>739 North Main Street</b>						Item or Purpose for Debt <b>Yard Signs</b>			Outstanding Balance <b>553.45</b>	
City <b>Akron</b>				State <b>OH</b>		Zip Code <b>44310</b>		Payments Made This Period		
								Date <b>0 5 1 0 1 6</b>		
								Amount <b>200.00</b>		
Date Debt was originally Incurred										
Registration Number, if PAC										

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made this period to the Statement of Expenditures (Form No. 31-B). Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.

Total Payments this Period \$ 1,150.00 (also record on Form 31-B)

Total Outstanding Balance \$ 1,703.45 (also record on cover page)

## Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee <b>Committee to Elect Veronica Sims</b>									
To Whom Owed <b>Graffiti Print Shop</b>						Prior Amount <b>553.45</b>		Amt. Incurred this Period <b>0.00</b>	
Address <b>739 North Main Street</b>						Item or Purpose for Debt <b>Yard Signs</b>		Outstanding Balance <b>453.45</b>	
City <b>Akron</b>			State <b>OH</b>	Zip Code <b>44310</b>		Payments Made This Period			
						Date		Amount	
Date Debt was originally Incurred						M	D	Y	\$
			0	7	2	1	1	5	100.00
Registration Number, if PAC						M	D	Y	
To Whom Owed <b>Graffiti Print Shop</b>						Prior Amount <b>453.45</b>		Amt. Incurred this Period <b>0.00</b>	
Address <b>739 North Main Street</b>						Item or Purpose for Debt <b>Yard Signs</b>		Outstanding Balance <b>353.45</b>	
City <b>Akron</b>			State <b>OH</b>	Zip Code <b>44310</b>		Payments Made This Period			
						Date		Amount	
Date Debt was originally Incurred						M	D	Y	\$
			0	7	2	1	1	5	100.00
Registration Number, if PAC						M	D	Y	
To Whom Owed <b>Graffiti Print Shop</b>						Prior Amount <b>353.45</b>		Amt. Incurred this Period <b>0.00</b>	
Address <b>739 North Main Street</b>						Item or Purpose for Debt <b>Yard Signs</b>		Outstanding Balance <b>253.45</b>	
City <b>Akron</b>			State <b>OH</b>	Zip Code <b>44310</b>		Payments Made This Period			
						Date		Amount	
Date Debt was originally Incurred						M	D	Y	\$
			0	7	2	1	1	5	100.00
Registration Number, if PAC						M	D	Y	

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made this period to the Statement of Expenditures (Form No 31-B)  
Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-1) Transfer total outstanding debt amount to the cover page

Total Payments this Period \$ 300.00 (also record on Form 31-B)

Total Outstanding Balance \$ 1,703.45 (also record on cover page)