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| Committee Name FRIENDS OF SCOTT GALE | | Office Sought Fiscal Officer TWP | | District TWP |
| Street Address 7960 Jill Drive | | City SALAMORE HILLS | State OH | Zip 44067 |
| Candidate Name OR PAC Registration Number SCOTT GALE | | Treasurer Name William Hurd | | Election Date (MM/DD/YYYY) 11/2015 |
| Type of Report (choose one): <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Post-Primary <input type="checkbox"/> Pre-General <input type="checkbox"/> Post-General | | | | |
| Statewide Candidates Only: <input type="checkbox"/> July Monthly <input type="checkbox"/> August Monthly <input type="checkbox"/> September Monthly | | | | Year 2017 |
| Amended Report <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | Termination <input type="checkbox"/> Check this box if the committee wishes to terminate with this report | | Short Form Report (R.C. 3517.10(H)) <input checked="" type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions. |

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| 1. Amount brought forward from last report | 0 |
| 2. Total monetary contributions (From Forms 31-A and 31-E) | 0 |
| 3. Total other income (From Form 31-A-2) | 0 |
| 4. Total funds available (sum of lines 1, 2, 3) | 0 |
| 5. Total monetary expenditures (From Forms 31-B and 31-F) | 0 |
| 6. Balance on hand (line 4 minus line 5) | 0 |
| 7. Value of in-kind contributions received (From Form 31-J-1) | 0 |
| 8. Value of in-kind contributions made (From Form 31-J-2) | 0 |
| 9. Outstanding loans owed by committee (From Form 31-C) | 0 |
| 10. Outstanding debts owed by committee (From Form 31-N) | 0 |
| 11. Outstanding loans owed to committee (From Form 31-K) | 0 |
| 12. Value of independent expenditures made (From Form 31-U) | 0 |

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SUMMIT COUNTY
BOARD OF ELECTIONS

2018 JAN 25 PM 12:24
 #1922 RB

THIS STATEMENT IS MADE UNDER PENALTY OF ELECTION FALSIFICATION.
WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

[Signature]
Signature of Treasurer or Deputy Treasurer

1-25-18
Date (MM/DD/YYYY)

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|--------------------------------|-------------------------------|-------------------------|-------------------------|
| Contribution Pages 0 | Expenditure Pages 0 | Other Pages 1 | Total Pages 1 |
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