



Committee Name Tallmadge Pride Committee dba Citizens for Tallmadge Schools		Office Sought		District
Street Address 207 Kensington Park Circle		City Tallmadge	State OH	Zip 44278
Candidate Name OR PAC Registration Number		Treasurer Name Joie Boughner		Election Date (MM/DD/YYYY)
<b>Type of Report (choose one):</b> <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				
<b>Amended Report</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>Termination</b> <input type="checkbox"/> Check this box if the committee wishes to terminate with this report		<b>Short Form Report (R.C. 3517.10(H))</b> <input type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions.

Year  
2017

1. Amount brought forward from last report	\$11,798.90
2. Total monetary contributions (From Forms 31-A and 31-E)	
3. Total other income (From Form 31-A-2)	
4. Total funds available (sum of lines 1, 2, 3)	\$11,798.90
5. Total monetary expenditures (From Forms 31-B and 31-F)	\$6.00
6. Balance on hand (line 4 minus line 5)	\$11,792.90
7. Value of in-kind contributions received (From Form 31-J-1)	
8. Value of in-kind contributions made (From Form 31-J-2)	
9. Outstanding loans owed by committee (From Form 31-C)	
10. Outstanding debts owed by committee (From Form 31-N)	
11. Outstanding loans owed to committee (From Form 31-K)	
12. Value of independent expenditures made (From Form 31-U)	

OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS

2018 MAR 29 PM 3:26

APPROVAL

#1939  
BOD

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

01/26/2018

Signature of Treasurer or Deputy Treasurer Date (MM/DD/YYYY)

Contribution Pages 0	Expenditure Pages 1	Other Pages 1	Total Pages 2
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**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b>			
Tallmadge Pride Committee dba Citizens for Tallmadge Schools			
To Whom Paid		Date (MM/DD/YYYY)	Amount
Key Bank		07/31/2017	\$3.00
Street Address		Purpose	
76 Tallmadge Circle		Paper Statement Fee	
City	State	Zip Code	Check Number
Tallmadge	OH	44278	Electronic Debit
To Whom Paid		Date (MM/DD/YYYY)	Amount
Key Bank		08/31/2017	\$3.00
Street Address		Purpose	
76 Tallmadge Circle		Paper Statement Fee	
City	State	Zip Code	Check Number
Tallmadge	OH	44278	Electronic Debit
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State	Zip Code	Check Number
	OH		
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State	Zip Code	Check Number
	OH		
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State	Zip Code	Check Number
	OH		

Page Total \$ 6.00