



Committee Name COMMITTEE TO ELECT GLORIA RODGERS		Office Sought SUMMIT COUNTY COUNCIL		District SUMMIT
Street Address 1316 RITCHIE RD.		City STOW	State OH	Zip 44224
Candidate Name OR PAC Registration Number		Treasurer Name RODNEY G. ARMSTRONG, JR.		Election Date (MM/DD/YYYY)

Type of Report (choose one):

Annual Semiannual Pre-Primary Post-Primary Pre-General Post-General

Statewide Candidates Only:

July Monthly August Monthly September Monthly

Year
2018

Amended Report

No Yes

Termination

Check this box if the committee wishes to terminate with this report

Short Form Report (R.C. 3517.10(H))

Check this box if the committee is filing a short term report. See attached instructions.

1. Amount brought forward from last report	2614.19
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)	2614.19
5. Total monetary expenditures (From Forms 31-B and 31-F)	459.98
6. Balance on hand (line 4 minus line 5)	2154.21
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)	4000.00
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

2019 JAN 16 PM 4:26
SUMMIT COUNTY BOARD OF ELECTIONS AKRON OHIO 44311
RBJ/2608

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

Signature of Treasurer or Deputy Treasurer

01/15/2019
Date (MM/DD/YYYY)

Contribution Pages	Expenditure Pages	Other Pages	Total Pages
	1	2	3



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee COMMITTEE TO ELECT GLORIA RODGERS			
To Whom Paid RG DIGITAL		Date (MM/DD/YYYY) 07/03/2018	Amount \$ 416.33
Street Address 126 W STREETSBORO ST, SUITE 7		Purpose WEB PAGE HOSTING	
City HUDSON	State OH	Zip Code 44236	Check Number 1001
To Whom Paid HUNTINGTON BANK		Date (MM/DD/YYYY) 07/05/2018	Amount \$ 43.65
Street Address 311 KENT RD		Purpose ORDER CHECKS	
City STOW	State OH	Zip Code 44224	Check Number DEBIT
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 459.98



Statement of Loans Received

Form 31-C

R.C. 3517.10

Full Name of Committee COMMITTEE TO ELECT GLORIA RODGERS					
From Whom Received GLORIA RODGERS				Prior Amount 4,000.00	Amt. Incurred this Period 0
Street Address 4562 NEWCOMMER RD					Outstanding Balance 4,000.0
City STOW	State OH	Zip Code 44224	Loans Received This Period		Payments This Period
Date Loan was Originally Incurred (MM/DD/YYYY) 05/24/2016		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
Registration Number, if PAC		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
Employer/Occupation/Labor Organization*		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
From Whom Received				Prior Amount	Amt. Incurred this Period
Street Address					Outstanding Balance
City	State	Zip Code	Loans Received This Period		Payments This Period
Date Loan was Originally Incurred (MM/DD/YYYY)		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
Registration Number, if PAC		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
Employer/Occupation/Labor Organization*		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	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 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).

Total Prior Amount \$ 4,000.00

Total Received This Period \$ 0 (also record on Form 31-A-2)

Total Payments Received this Period \$ 0 (also record on Form 31-B)

Total Outstanding Balance \$ 4,000.00 (also record on Form 30-A)