

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee Souders for Council						Registration Number, if PAC					
Full Name of Candidate Ward Souders											
Street Address 2103 8th Street					Office Sought City Council			District Ward 4			
City Cuyahoga Falls						State O H		Zip Code 44221			
Type of Report (place X to the left of report type)		Pre-Primary		Post-Primary		Pre-General		Post-General		X	Annual Year
		July Monthly		August Monthly		September Monthly		Termination			2018
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	D	Y		
							1	1	0	6	0
									0		7

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	\$ 22.29
2. Total monetary contributions (From Form No. 31-A)	\$
3. Total other income (From Form No. 31-A-2)	\$
4. Total funds available (sum of lines 1, 2, 3)	\$ 22.29
5. Total monetary expenditures (From Form No. 31-B)	\$
6. Balance on hand (line 4 minus line 5)	\$ 22.29
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$
9. Outstanding loans owed by committee (From Form No. 31-C)	\$ 661.00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	\$
12. Value of independent expenditures made (From Form No. 31-U)	\$
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

2019 JAN 25 PM 12: 07

SUMMIT COUNTY
BOARD OF ELECTIONS
AKRON OHIO 44314

#2641 Arc

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

Sue A. Souders _____ *Sue A. Souders* _____ 01/25/19 _____
Print Name and Title (Treasurer and Deputy Treasurer only) Signature Date

Contribution pages <u>1</u>

Expenditure pages _____

Other pages <u>1</u>

Total pages <u>2</u>

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee Souders for Council												
From Whom Received Ward & Sue Souders							Prior Amount 661.00		Amt. Incurred this Period			
Address 2103 8th Street									Outstanding Balance 661.00			
City Cuyahoga Falls		State OH	Zip Code 44221		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	\$
0		8	0	6	0	7						
Registration Number, if PAC					M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*					M	D	Y		M	D	Y	
From Whom Received							Prior Amount		Amt. Incurred this Period			
									Outstanding Balance			
City		State	Zip Code		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	\$
Registration Number, if PAC					M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*					M	D	Y		M	D	Y	
From Whom Received							Prior Amount		Amt. Incurred this Period			
Address									Outstanding Balance			
City		State	Zip Code		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	\$
Registration Number, if PAC					M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*					M	D	Y		M	D	Y	

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees donate 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)

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 Total Outstanding Balance to the cover page (Form No. 30-A).

- 1 Total prior amount \$ 661.00
- 2 Total received this period \$ 0.00 (To Form No. 31-A-2)
- 3 Total Payments this Period \$ 0.00 (also record on Form 31-B)
- 4 Total Outstanding Balance \$ 661.00 (To Form No. 30-A)