



2019 JUL 22 PH 4:27  
BOARD OF ELECTIONS  
AKRON OHIO 44301

3353

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  
2019

**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	2154.21
2. Total monetary contributions (From Forms 31-A and 31-E)	40.00
3. Total other income (From Form 31-A-2)	0
4. Total funds available (sum of lines 1, 2, 3)	2194.21
5. Total monetary expenditures (From Forms 31-B and 31-F)	0
6. Balance on hand (line 4 minus line 5)	2194.21
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

OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS

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

*Rodney G. Armstrong, Jr.*  
Signature of Treasurer or Deputy Treasurer

07/20/2019

Date (MM/DD/YYYY)

Contribution Pages  
1

Expenditure Pages

Other Pages  
2

Total Pages  
3



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> COMMITTEE TO ELECT GLORIA RODGERS				
Full Name of Contributor RODNEY ARMSTRONG, JR.			Registration Number, if PAC	
Street Address 1316RITCHIE RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CASH
City STOW	State OH	Zip Code 44224	Date (MM/DD/YYYY) 02/04/2019	Amount 40.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (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)]



**Statement of Loans Received**

Form 31-C

R.C. 3517.10

<b>Full Name of Committee</b> 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	<b>Loans Received This Period</b>		<b>Payments This Period</b>		
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 <input type="text"/>	Zip Code	<b>Loans Received This Period</b>		<b>Payments This Period</b>		
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)