



#3382 Avr

Ohio Campaign Finance Report

Form 30-A

ORC 3517.10

2019 JUL 25 PM 2:12

Committee Name <b>Citizens for a Strong Macedonia</b>		Office Sought		District
Street Address <b>1286 Laurel Dr.</b>		City <b>Macedonia</b>	State <b>OH</b>	Zip <b>44056</b>
Candidate Name OR PAC Registration Number		Treasurer Name <b>Melissa Granke</b>		Election Date (MM/DD/YYYY) <b>n/a</b>

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**

<b>Amended Report</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Termination</b> <input checked="" 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.
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1. Amount brought forward from last report	\$ 50 <sup>92</sup>
2. Total monetary contributions (From Forms 31-A and 31-E)	\$ 165 <sup>00</sup>
3. Total other income (From Form 31-A-2)	\$ 0
4. Total funds available (sum of lines 1, 2, 3)	\$ 215 <sup>92</sup>
5. Total monetary expenditures (From Forms 31-B and 31-F)	\$ 213 <sup>05</sup>
6. Balance on hand (line 4 minus line 5)	\$ 2 <sup>87</sup>
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

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

*Melissa N. Granke*  
Signature of Treasurer or Deputy Treasurer

**07/25/2019**  
Date (MM/DD/YYYY)

Contribution Pages  
**1**

Expenditure Pages  
**1**

Other Pages  
**1**

Total Pages  
**4**

OFFICIAL COPY  
SUNBURT COUNTY  
BOARD OF ELECTIONS



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Citizens For a Strong Macedonia				
<b>Full Name of Contributor</b> Melissa N. Granke			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1286 Laurel Dr.		<b>Employer/Occupation/Labor Organization*</b> Progressive/Insurance Agent		<b>Form (Cash, Check, etc.)</b> cash
<b>City</b> Macedonia	<b>State</b> OH <input type="checkbox"/>	<b>Zip Code</b> 44056	<b>Date (MM/DD/YYYY)</b> 01/08/2019	<b>Amount</b> \$75 <sup>00</sup>
<b>Full Name of Contributor</b> Melissa N. Granke			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1286 Laurel Dr.		<b>Employer/Occupation/Labor Organization*</b> Progressive/Insurance Agent		<b>Form (Cash, Check, etc.)</b> cash
<b>City</b> Macedonia	<b>State</b> OH <input type="checkbox"/>	<b>Zip Code</b> 44056	<b>Date (MM/DD/YYYY)</b> 05/02/2019	<b>Amount</b> \$90 <sup>00</sup>
<b>Full Name of Contributor</b>			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> <input type="checkbox"/>	<b>Zip Code</b>	<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Full Name of Contributor</b>			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> <input type="checkbox"/>	<b>Zip Code</b>	<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Full Name of Contributor</b>			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> <input type="checkbox"/>	<b>Zip Code</b>	<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>

\*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 Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Citizens for a Strong Macedonia			
To Whom Paid Facebook ads		Date (MM/DD/YYYY) 04/08/2019	Amount \$81 <sup>59</sup>
Street Address 1 Hacker way		Purpose paid ads	
City Menlo Park	State CA	Zip Code 94025	Check Number debit
To Whom Paid Facebook ads		Date (MM/DD/YYYY) 05/09/2019	Amount \$37 <sup>47</sup>
Street Address 1 Hacker way		Purpose paid ads	
City Menlo Park	State CA	Zip Code 94025	Check Number debit
To Whom Paid Facebook ads		Date (MM/DD/YYYY) 06/09/2019	Amount \$9 <sup>99</sup>
Street Address 1 Hacker way		Purpose paid ads	
City Menlo Park	State CA	Zip Code 94025	Check Number debit
To Whom Paid Woodforest National Bank		Date (MM/DD/YYYY) Dec <sup>2018</sup> - June <sup>2019</sup>	Amount \$84 <sup>00</sup>
Street Address PO Box 7889		Purpose Bank account fee \$12/month	
City The woodlands	State TX	Zip Code 77387	Check Number debit
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 213<sup>05</sup>