



3346A/C

SUMMIT COUNTY
BOARD OF ELECTIONS
AKRON, OHIO

Ohio Campaign Finance Report

Form 30-A

ORC 3517.10

2019 JUL 18 PM 1:58

| | | | | |
|--|--|----------------------------------|-------------|----------------------------|
| Committee Name Citizens Supporting Twinsburg Public Library | | Office Sought | | District |
| Street Address 2520 Maple Drive | | City Twinsburg | State OH | Zip 44087 |
| Candidate Name OR PAC Registration Number | | Treasurer Name Edward Kancler | | 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 |
|------|

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 | 2948.74 |
| 2. Total monetary contributions (From Forms 31-A and 31-E) | 0 |
| 3. Total other income (From Form 31-A-2) | .73 |
| 4. Total funds available (sum of lines 1, 2, 3) | 2949.47 |
| 5. Total monetary expenditures (From Forms 31-B and 31-F) | 0 |
| 6. Balance on hand (line 4 minus line 5) | 2949.47 |
| 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 |

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.**

Edward Kancler
Signature of Treasurer or Deputy Treasurer

TREASURER

07/12/2019
Date (MM/DD/YYYY)

Contribution Pages

Expenditure Pages

Other Pages
2

Total Pages
3



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

| | | | |
|---|----------------------------|---------------------------------|----------------------------------|
| Full Name of Committee Citizens Supporting Twinsburg Public Library | | | |
| Full Name of Contributor The Middlefield Banking Company | | Registration Number, if PAC | |
| Street Address P.O. Box 35 | Type* Investment/Income | Date (MM/DD/YYYY) 01/31/2019 | Form (Cash, Check, etc.) Cash |
| City Middlefield | State OH | Zip Code 44062 | Amount .13 |
| Full Name of Contributor The Middlefield Banking Company | | Registration Number, if PAC | |
| Street Address P.O. Box 35 | Type* Investment/Income | Date (MM/DD/YYYY) 02/28/2019 | Form (Cash, Check, etc.) Cash |
| City Middlefield | State OH | Zip Code 44062 | Amount .11 |
| Full Name of Contributor The Middlefield Banking company | | Registration Number, if PAC | |
| Street Address P.O. Box 35 | Type* Investment/Income | Date (MM/DD/YYYY) 03/29/2019 | Form (Cash, Check, etc.) Cash |
| City Middlefield | State OH | Zip Code 44062 | Amount .12 |
| Full Name of Contributor The Middlefield Banking Company | | Registration Number, if PAC | |
| Street Address P.O. Box 35 | Type* Investment/Income | Date (MM/DD/YYYY) 04/30/2019 | Form (Cash, Check, etc.) Cash |
| City Middlefield | State OH | Zip Code 44062 | Amount .13 |
| Full Name of Contributor Middlefield Banking Company | | Registration Number, if PAC | |
| Street Address P.O. Box 35 | Type* Investment/Income | Date (MM/DD/YYYY) 05/31/2019 | Form (Cash, Check, etc.) Cash |
| City Middlefield | State OH | Zip Code 44062 | Amount .13 |

* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

| | | | |
|---|----------------------------|---------------------------------|----------------------------------|
| Full Name of Committee Citizens Supporting Twinsburg Public Library | | | |
| Full Name of Contributor The Middlefield Banking Company | | Registration Number, if PAC | |
| Street Address P.O. Box 35 | Type* Investment/Income | Date (MM/DD/YYYY) 06/28/2019 | Form (Cash, Check, etc.) Cash |
| City Middlefield | State OH | Zip Code 44062 | Amount .11 |
| Full Name of Contributor | | Registration Number, if PAC | |
| Street Address | Type* Refund | Date (MM/DD/YYYY) | Form (Cash, Check, etc.) |
| City | State OH | Zip Code | Amount |
| Full Name of Contributor | | Registration Number, if PAC | |
| Street Address | Type* Refund | Date (MM/DD/YYYY) | Form (Cash, Check, etc.) |
| City | State OH | Zip Code | Amount |
| Full Name of Contributor | | Registration Number, if PAC | |
| Street Address | Type* Refund | Date (MM/DD/YYYY) | Form (Cash, Check, etc.) |
| City | State OH | Zip Code | Amount |
| Full Name of Contributor | | Registration Number, if PAC | |
| Street Address | Type* Refund | Date (MM/DD/YYYY) | Form (Cash, Check, etc.) |
| City | State OH | Zip Code | Amount |

* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.