

Ohio Campaign Finance Report

JAN 31 2017 PM 12:34

Prescribed by Secretary of State 3/05

Full Name of Committee Clay for Council		Registration Number, if PAC	
Full Name of Candidate David J Clay			
Street Address 1039 Cherokee Rd		Office Sought City Council	District Ward 2
City Chillicothe		State OH	Zip Code 45601
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input type="checkbox"/> Post-Primary	<input type="checkbox"/> Pre-General
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input checked="" type="checkbox"/> Post-General
	<input type="checkbox"/> Termination	<input type="checkbox"/> Annual Year	<input type="checkbox"/> Semiannual
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 11/03/15	

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 for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

Report is:
OK. NEEDS INFO / AMENDED IN CFS SCANNED FOR ONLINE

1. Amount brought forward from last report	\$	342.05
2. Total monetary contributions (From Form No. 31-A)	\$	0
3. Total other income (From Form No. 31-A-2)	\$	0
4. Total funds available (sum of lines 1, 2, 3)	\$	342.05
5. Total monetary expenditures (From Form No. 31-B)	\$	25.00
6. Balance on hand (line 4 minus line 5)	\$	317.05
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	0
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	0
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	0
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	0
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	0
12. Value of independent expenditures made (From Form No. 31-U)	\$	0
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period	\$	

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.

Gayle S. Smith
Print Name and Title (Treasurer and Deputy Treasurer only)

[Signature]
Signature

1/31/17
Date

Contribution pages _____

Expenditure pages **1**

Other pages _____

Total pages **2**

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <i>Clay for Council</i>										
To Whom Paid <i>Ross Co. Republican Party</i>							M	D	Y	Amount
Address				Purpose <i>Ross Co. Fair Contribution</i>			<i>080916</i>		<i>2500</i>	
City <i>Chillicothe</i>		State <i>OH</i>	Zip Code <i>45601</i>		Check Number <i>1023</i>					
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City		State <i>OH</i>	Zip Code		Check Number					
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City		State <i>OH</i>	Zip Code		Check Number					
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City		State <i>OH</i>	Zip Code		Check Number					
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City		State <i>OH</i>	Zip Code		Check Number					
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City		State <i>OH</i>	Zip Code		Check Number					
To Whom Paid							M	D	Y	Amount
Address				Purpose						
City		State <i>OH</i>	Zip Code		Check Number					