30-A
R.C. 3517.10

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee	Registration Number, if PAC
Voters Engaged to Oppose 64 (VETO 64)	
Full Name of Candidate	
Ballot issue	
Street Address	**Office Sought** / **District**
1538 Northland Ave.	ballot issue / Lakewood
City / **State** / **Zip Code**	
Lakewood / OH / 44107	

Type of Report (place X to the left of report type)											
		Pre-Primary		Post-Primary	X	Pre-General		Post-General		Annual Year ____
		July Monthly		August Monthly		September Monthly		Termination		Semiannual ____
Amended Report? X Yes ☐ No	Report Electronically Filed? ☐ Yes ☐ No		Date of Election		M		D		Y	

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.

1. Amount brought forward from last report	$	0	.00
2. Total monetary contributions (From Form No. 31-A)	$	525	.00 ✓
3. Total other income (From Form No. 31-A-2)	$	1,600	.00 ✓
4. Total funds available (sum of lines 1, 2, 3)	$	2,125	.00 ✓
5. Total monetary expenditures (From Form No. 31-B)	$	0	.00
6. Balance on hand (line 4 minus line 5)	$	2,125	.00 ✓
7. Value of in-kind contributions received (From Form No. 31-J-1)	$	0	.00
8. Value of in-kind contributions made (From Form No. 31-J-2)	$	0	.00
9. Outstanding loans owed by committee (From Form No. 31-C)	$	1,600	.00 ✓
10. Outstanding debts owed by committee (From Form No. 31-N)	$	0	.00
11. Outstanding loans owed to committee (From Form No. 31-K)	$	0	.00
12. Value of independent expenditures made (From Form No. 31-U)	$	0	.00
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.

Jay R. Casson, Deputy Treasurer — Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

10/22/15 — Date

Contribution pages 2	Expenditure pages 0	Other pages 2	Total pages 4

10/22/15 PM 2:58 CPS

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R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full: Voters Engaged to Oppose 64 (VETO 64)

Full Name of Contributor	Registration Number, if PAC	Street Address	Employer/Occupation/Labor Organization*	City	State	Zip Code	Date (M D Y)	Form (Cash, Check, etc.)	Amount
Michael Belsito		1477 Cohasset		Lakewood	OH	44107	10 14 15	Check	$50.00
Tom Wagner		1483 Lewis		Lakewood	OH	44107	10 13 15	Check	$50.00
Charles B. Shaughnessy		1268 Andrew		Lakewood	OH	44107	10 13 15	Check	$35.00
Ronald Petrie		1345 Brockley		Lakewood	OH	44107	10 14 15	cash	$50.00
Stephen Bennet		15514 Detroit Ave.		Lakewood	OH	44107	10 13 15	check	$50.00
Lasley Costello - Timothy Lasky		15514 Detroit		Lakewood	OH	44107	10 13 15	check	100.00
Jay R. Carson		13938 Lake Ave		Lakewood OH	OH	44107	10 14 15	transfer	$100.00
Linda Beebe		1490 Mars		Lakewood	OH	44107	10 13 15	check	$40.00

* 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)]

Page Total $ 475.00

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R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full: Voters Engaged to Oppose 64 (VETO 64)

Full Name of Contributor				Registration Number, if PAC
Tom Bullock				
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
1508 Rosewood				Check
City	**State**	**Zip Code**	**M D Y**	**Amount**
Lakewood	OH	44107	10 08 15	$50.00

Full Name of Contributor				Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount

Full Name of Contributor				Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount

Full Name of Contributor				Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount

Full Name of Contributor				Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount

Full Name of Contributor				Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount

Full Name of Contributor				Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount

Full Name of Contributor				Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount

Full Name of Contributor				Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	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)]

✓

Page Total $ 50

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R.C. 3517.10(B)

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Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full: Voters Engaged to Oppose 64 (VETO 64)

Full Name	Address	City	Type*	State	Zip Code	Registration Number, if PAC	M	D	Y	Amount	Form (Cash, Check, etc.)
Tom Bullock for Lakewood	1256 Cook Ave.	Lakewood	LN	OH	44107		10	13	15	$1,600	Check

* 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.

Page Total $ 1,600

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R.C. 3517.10

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Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee: Voters Engaged to Oppose 64 (VETO 64)

From Whom Received: Tom Bullock for Lakewood
Address: 1256 Cook Ave.
City: Lakewood | State: OH | Zip Code: 44107
Prior Amount: 0 | Amt. Incurred this Period: $1,600 | Outstanding Balance: $1,600

	Loans Received This Period			Payments This Period	
	Date	Amount		Date	Amount
Date Loan was originally Incurred	10/14/15	$ 1,600			$ 0.00
Registration Number, if PAC					
Employer/Occupation/Labor Organization*					

From Whom Received:
Address:
City | State | Zip Code
Prior Amount | Amt. Incurred this Period | Outstanding Balance

	Loans Received This Period			Payments This Period	
	Date	Amount		Date	Amount
Date Loan was originally Incurred		$			$
Registration Number, if PAC					
Employer/Occupation/Labor Organization*					

From Whom Received:
Address:
City | State | Zip Code
Prior Amount | Amt. Incurred this Period | Outstanding Balance

	Loans Received This Period			Payments This Period	
	Date	Amount		Date	Amount
Date Loan was originally Incurred		$			$
Registration Number, if PAC					
Employer/Occupation/Labor Organization*					

* 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).

[1] Total prior amount $ 0.00

[2] Total received this period $ 1,600.00 (To Form No. 31-A-2)

[3] Total payments this period $ 0.00 (To Form No. 31-B)

[4] Total Outstanding Balance $ 1,600.00 (To Form No. 30-A)