

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Friends of Steve Barry for Sheriff</b>		Registration Number, if PAC	
Full Name of Candidate <b>Steve Barry</b>			
Street Address <b>1520 Applewood Way</b>		Office Sought <b>Summit Co. Sheriff</b>	District
City <b>Uniontown</b>		State <b>OH</b>	Zip Code <b>44685</b>
Type of Report (place X to the left of report type)	Pre-Primary	<input checked="" type="checkbox"/> Post-Primary	Pre-General
	July Monthly	August Monthly	September Monthly
			Post-General
			Termination
			Annual Year
			Semi-annual
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	<b>4 3 6 1 0 S.W.</b>

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	\$ 31,329.00
2. Total monetary contributions (From Form No. 31-A)	\$ 528.00
3. Total other income (From Form No. 31-A-2)	\$
4. Total funds available (sum of lines 1, 2, 3)	\$ 31,857.00
5. Total monetary expenditures (From Form No. 31-B)	\$ 2,709.00
6. Balance on hand (line 4 minus line 5)	\$ 29,148.00
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$
9. Outstanding loans owed by committee (From Form No. 31-C)	\$
10. Outstanding debts owed by committee (From Form No. 31-N)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	\$ 5,000.00
12. Value of independent expenditures made (From Form No. 31-U)	\$
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$

**OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS**

APR 19 PM 3:20  
SUMMIT COUNTY  
BOARD OF ELECTIONS  
AKRON, OHIO  
#11,039 AVC

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.

Susan L. Wington Treasurer Susan L. Wington Signature April 19, 2016 Date

Contribution pages 1

Expenditure pages 2

Other pages 1

Total pages 4

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Friends of Steve Barry for Sheriff.</b>							
Full Name of Contributor <b>Prestwick Golf Club Inc. (John Raineri)</b>					Registration Number, if PAC		
Street Address <b>3751 Glen Eagles Blvd.</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>27154</b>		
City <b>Uniontown</b>		State <b>OH</b>	Zip Code <b>44685</b>	M <b>01</b>	D <b>14</b>	Y <b>16</b>	Amount <b>\$528<sup>00</sup></b>
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
		<b>OH</b>					
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
		<b>OH</b>					
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
		<b>OH</b>					
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
		<b>OH</b>					
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
		<b>OH</b>					
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
		<b>OH</b>					
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
		<b>OH</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

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of Steve Barry for Sheriff							
To Whom Paid	Greater Green Foundation			M	D	Y	Amount
				12	16	15	\$ 100 <sup>00</sup>
Address	2255 Greensburg Rd Meals for Residents Community Event.						
City	N. Canton	State	OH	Zip Code	44720	Check Number	1232
To Whom Paid	Friends of Kristen Scalise			M	D	Y	Amount
				01	15	16	\$ 100 <sup>00</sup>
Address	175 S. Main St. 3 <sup>rd</sup> Floor Donation						
City	Akron	State	OH	Zip Code	44308	Check Number	1238
To Whom Paid	Green Schools Foundation			M	D	Y	Amount
				02	01	16	\$ 350 <sup>00</sup>
Address	1755 Town Park Blvd Celebration of Education Community Event						
City	Uniontown	State	OH	Zip Code	44685	Check Number	1230
To Whom Paid	Committee for the Non-Partisan Independent Districts			M	D	Y	Amount
				02	23	16	\$ 1,000 <sup>00</sup>
Address	1460 Curtis Ave. Campaign Donation (Ballot Issue)						
City	Cuyahoga Falls	State	OH	Zip Code	44221	Check Number	1261
To Whom Paid	Victim Assistance Program			M	D	Y	Amount
				02	19	16	\$ 500 <sup>00</sup>
Address	150 Furnace St. Annual Fundraiser.						
City	Akron	State	OH	Zip Code	44304	Check Number	1259
To Whom Paid	Emilia Sykes Campaign			M	D	Y	Amount
				02	29	16	\$ 100 <sup>00</sup>
Address	109 N. Howard St. Fundraiser						
City	Akron	State	OH	Zip Code	44308	Check Number	1262
To Whom Paid	Paula Prentice for County Council			M	D	Y	Amount
				03	02	16	\$ 100 <sup>00</sup>
Address	175 S Main St. Room 700 Donation						
City	Akron	State	OH	Zip Code	44308	Check Number	1263
To Whom Paid	Friends of Kristen Scalise			M	D	Y	Amount
				03	04	16	\$ 250 <sup>00</sup>
Address	175 S. Main St. 3 <sup>rd</sup> Floor Fundraiser						
City	Akron	State	OH	Zip Code	44308	Check Number	1264

# Statement of Expenditures

Prescribed by Secretary of State 201

Name of Committee in Full Friends of Steve Barry for Sheriff				
To Whom Paid Boys + Girls Club of Akron	M	D	Y	Amount \$ 150 <sup>00</sup>
Address 888 Eller Ave.	Purpose Donation / Fundraiser			
City Akron	State	Zip Code 44306	Check Number 1266	
To Whom Paid Friends of Russ Pry	M	D	Y	Amount \$ 50 <sup>00</sup>
Address 554 Weber Ave.	Purpose St. Patrick's Day Fundraiser			
City Akron	State OH	Zip Code 44303	Check Number 1267	
To Whom Paid PNC Bank (January thru March)	M	D	Y	Amount \$ 9 <sup>00</sup>
Address 3357 S. Arlington Rd	Purpose Bank Charges (Monthly)			
City Akron	State OH	Zip Code 44312	Check Number	
To Whom Paid	M	D	Y	Amount
Address	Purpose			
City	State	Zip Code	Check Number	
To Whom Paid	M	D	Y	Amount
Address	Purpose			
City	State	Zip Code	Check Number	
To Whom Paid	M	D	Y	Amount
Address	Purpose			
City	State	Zip Code	Check Number	
To Whom Paid	M	D	Y	Amount
Address	Purpose			
City	State	Zip Code	Check Number	

## Statement of Loans Made

Prescribed by Secretary of State 2/01

Full Name of Committee <b>Friends of Steve Barry for Sheriff</b>											
To Whom Made <b>Summit Co. Democratic Party</b>					Prior Amount <b>\$5,000<sup>00</sup></b>			Amt. Loaned this Period			
Address <b>438 Grant St.</b>					Outstanding Balance <b>\$5,000<sup>00</sup></b>						
City <b>Akron</b>			State <b>OH</b>		Zip Code <b>44301</b>			Payments Received This Period Date Amount			
Date Loan was Originally Made			M	D	Y	M	D			Y	\$
								M	D	Y	\$
								M	D	Y	\$
To Whom Made					Prior Amount			Amt. Loaned this Period			
Address					Outstanding Balance						
City			State		Zip Code			Payments Received This Period Date Amount			
Date Loan was Originally Made			M	D	Y	M	D			Y	\$
								M	D	Y	\$
								M	D	Y	\$
To Whom Made					Prior Amount			Amt. Loaned this Period			
Address					Outstanding Balance						
City			State		Zip Code			Payments Received This Period Date Amount			
Date Loan was Originally Made			M	D	Y	M	D			Y	\$
								M	D	Y	\$
								M	D	Y	\$

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans made this period to the Statement of Expenditures (Form No. 31-B). Transfer total of all payments received in this period to the Statement of Other Income (Form No. 31-A-2). Transfer Total Outstanding Balance to the cover page.

Total Loans this Period \$ - 0 - (also record on Form 31-B)

Total Outstanding Balance \$ 5,000<sup>00</sup> (also record on cover page)

Total Payments Received this Period \$ - 0 - (also record on Forms 31-A-2)