

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Friends of Wilhite</b>							Registration Number, if PAC		
Full Name of Candidate <b>Jeffrey E. Wilhite</b>									
Street Address <b>2998 Clear Creek Drive</b>					Office Sought <b>Summit County Council</b>			District <b>4</b>	
City <b>Cuyahoga Falls</b>						State <b>O H</b>		Zip Code <b>44223</b>	
Type of Report (place X to the left of report type)	Pre-Primary		<input checked="" type="checkbox"/> Post-Primary		Pre-General		Post-General		Annual Year
	July Monthly		August Monthly		September Monthly		Termination		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		M D Y <b>0 3 1 5 1 6</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 at 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	\$ 4,207.94
2. Total monetary contributions (From Form No. 31-A)	\$ 100.00
3. Total other income (From Form No. 31-A-2)	\$
4. Total funds available (sum of lines 1, 2, 3)	\$ 4,307.94
5. Total monetary expenditures (From Form No. 31-B)	\$ 1,135.12
6. Balance on hand (line 4 minus line 5)	\$ 3,172.82
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)	\$
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	\$

# 11/20  
SUMMIT COUNTY BOARD OF ELECTIONS AKRON, OHIO  
APR 21 AM 8:59

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SUMMIT COUNTY BOARD OF ELECTIONS

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

Don DeBord, Treasurer Signature [Signature] Date 4/20/16

Contribution pages 1

Expenditure pages 2

Other pages 0

Total pages 4 0

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends of Wilhite</b>							
Full Name of Contributor <b>Peter M. Kostoff</b>					Registration Number, if PAC		
Street Address <b>2995 Silver Maple Drive</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc ) <b>Check</b>	
City <b>Fairlawn</b>		State <b>O H</b>	Zip Code <b>44333</b>	M <b>0 3</b>	D <b>1 0</b>	Y <b>1 6</b>	Amount <b>100.00</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
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 appear. [R.C. 3517.10(B)(4)]

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full												
Friends of Wilhite												
To Whom Paid						M	D	Y	Amount			
Westfield Bank						0	2	2	7	1	6	35.12
Address			Purpose									
Grabham Road Branch			check order bank charge									
City		State	Zip Code	Check Number								
Cuyahoga Falls		O   H	44223	n/a								
To Whom Paid						M	D	Y	Amount			
Ohio Democratic Party						0	3	0	1	1	6	200.00
Address			Purpose									
340 East Fulton St			Donation									
City		State	Zip Code	Check Number								
Columbus		O   H	43215	1028								
To Whom Paid						M	D	Y	Amount			
Friends of Kristin M. Scalise						0	3	0	3	1	6	150.00
Address			Purpose									
3842 Dogwood Street			Donation									
City		State	Zip Code	Check Number								
Uniontown		O   H	44685	1029								
To Whom Paid						M	D	Y	Amount			
Friends of David Hamilton						0	3	0	3	1	6	100.00
Address			Purpose									
780 Harvard St			Donation									
City		State	Zip Code	Check Number								
Akron		O   H	44311	1030								
To Whom Paid						M	D	Y	Amount			
Friends of Russ Pry						0	3	0	3	1	6	100.00
Address			Purpose									
554 Weber Ave			Donation									
City		State	Zip Code	Check Number								
Akron		O   H	44303	1031								
To Whom Paid						M	D	Y	Amount			
St Paul AME Church - Harold K Stubbs Award Dinner						0	3	0	3	1	6	50.00
Address			Purpose									
P O Box 247			Donation/Dinner									
City		State	Zip Code	Check Number								
Akron		O   H	44309	1032								
To Whom Paid						M	D	Y	Amount			
Emily Sykes Campaign						0	3	1	5	1	6	100.00
Address			Purpose									
109 N Howard St, Unit A			Donation									
City		State	Zip Code	Check Number								
Akron		O   H	44308	1033								
To Whom Paid						M	D	Y	Amount			
Akron Community Foundation						0	3	1	5	1	6	100.00
Address			Purpose									
345 W Cedar St.			WEF Donation									
City		State	Zip Code	Check Number								
Akron		O   H	44307	1034								

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Friends of Wilhite</b>							
To Whom Paid <b>Summit County Democratic Party</b>				M	D	Y	Amount
				0	3	1	100.00
Address <b>438 Grant Street</b>		Purpose <b>Donation</b>					
City <b>Akron</b>	State <b>OH</b>	Zip Code <b>44311</b>	Check Number <b>1035</b>				
To Whom Paid <b>Akron Peace Makers</b>				M	D	Y	Amount
				0	3	1	100.00
Address <b>166 S. High St</b>		Purpose <b>Donation</b>					
City <b>Akron</b>	State <b>OH</b>	Zip Code <b>44308</b>	Check Number <b>1036</b>				
To Whom Paid <b>Allison Breaux for Judge</b>				M	D	Y	Amount
				0	4	0	100.00
Address <b>1668 Merriman Road</b>		Purpose <b>Donation</b>					
City <b>Akron</b>	State <b>OH</b>	Zip Code <b>44313</b>	Check Number <b>1037</b>				
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				
To Whom Paid				M	D	Y	Amount