

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <i>Citizens for Education</i>		Registration Number, if PAC <i>C-00444935</i>	
Full Name of Candidate			
Street Address <i>6075 Manchester Rd.</i>		Office Sought	District
City <i>Akron</i>		State <i>OH</i>	Zip Code <i>44319</i>
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input checked="" type="checkbox"/> Post-Primary	<input type="checkbox"/> Pre-General
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly
			<input type="checkbox"/> Post-General
			<input type="checkbox"/> Termination
			Annual Year
			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 <i>04/15/16</i>	

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	\$	<i>5898 00</i>
2. Total monetary contributions (From Form No. 31-A)	\$	<i>4103 00</i>
3. Total other income (From Form No. 31-A-2)	\$	
4. Total funds available (sum of lines 1, 2, 3)	\$	<i>10001 00</i>
5. Total monetary expenditures made (From Form No. 31-B)	\$	<i>1380 35</i>
6. Balance on hand (line 4 minus line 5)	\$	<i>8620 65</i>
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	<i>124 00</i>
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.	\$	

**OFFICIAL COPY
SUMMIT COUNTY
BOARD OF ELECTIONS**

APR 18 PM 3:57
SUMMIT COUNTY
BOARD OF ELECTIONS
AKRON, OHIO
#111033 Ave

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.

Karen Selzer, Deputy Treasurer *Karen Selzer* *4-18-16*
Print Name and Title (Treasurer and Deputy Treasurer only) Signature Date

Contribution pages 5

Expenditure pages 1

Other pages 24

Total pages 30

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Citizens for Education</i>						
Full Name of Contributor <i>Gabrielle Newell</i>				Registration Number, if PAC		
Street Address <i>5253 Dailey Rd.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>	
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44319</i>	M <i>0</i>	D <i>3</i>	Y <i>04</i>	Amount <i>20.00</i>
Full Name of Contributor <i>Amber Briggs</i>				Registration Number, if PAC		
Street Address <i>6600 Hampsher Rd.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Clinton</i>	State <i>OH</i>	Zip Code <i>44216</i>	M <i>0</i>	D <i>3</i>	Y <i>04</i>	Amount <i>22.00</i>
Full Name of Contributor <i>Robin Anderson</i>				Registration Number, if PAC		
Street Address <i>3716 South Bay Rd. NE</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Olympia</i>	State <i>WA</i>	Zip Code <i>98506</i>	M <i>0</i>	D <i>3</i>	Y <i>04</i>	Amount <i>23.00</i>
Full Name of Contributor <i>Therese Davis</i>				Registration Number, if PAC		
Street Address <i>1501 Maple St.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Barberton</i>	State <i>OH</i>	Zip Code <i>44203</i>	M <i>0</i>	D <i>3</i>	Y <i>04</i>	Amount <i>24.00</i>
Full Name of Contributor <i>Manchester Music Boosters Club</i>				Registration Number, if PAC		
Street Address <i>6002 Kellar Rd.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44319</i>	M <i>0</i>	D <i>3</i>	Y <i>04</i>	Amount <i>100.00</i>
Full Name of Contributor <i>Amber Briggs</i>				Registration Number, if PAC		
Street Address <i>6600 Hampsher Rd.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>	
City <i>Clinton</i>	State <i>OH</i>	Zip Code <i>44216</i>	M <i>0</i>	D <i>3</i>	Y <i>04</i>	Amount <i>22.00</i>
Full Name of Contributor <i>Allison Misutka</i>				Registration Number, if PAC		
Street Address <i>6693 Hampsher Rd.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Clinton</i>	State <i>OH</i>	Zip Code <i>44216</i>	M <i>0</i>	D <i>3</i>	Y <i>07</i>	Amount <i>40.00</i>
Full Name of Contributor <i>Squire Patton Boggs</i>				Registration Number, if PAC		
Street Address <i>2550 M. Street NW</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Washington</i>	State <i>DC</i>	Zip Code <i>20037</i>	M <i>0</i>	D <i>3</i>	Y <i>07</i>	Amount <i>500.00</i>

* 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 Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Citizens for Education</i>							
Full Name of Contributor <i>Nicole Salas</i>						Registration Number, if PAC	
Street Address <i>2053 13th St.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Cuyahoga Falls</i>		State <i>OH</i>	Zip Code <i>44223</i>		M <i>03</i>	D <i>14</i>	Y <i>16</i>
Amount <i>20.00</i>							
Full Name of Contributor <i>Jennifer Paljich</i>						Registration Number, if PAC	
Street Address <i>444 Sturgeon Dr.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>New Franklin</i>		State <i>OH</i>	Zip Code <i>44319</i>		M <i>03</i>	D <i>14</i>	Y <i>16</i>
Amount <i>15.50</i>							
Full Name of Contributor <i>Kimberly Connelly</i>						Registration Number, if PAC	
Street Address <i>1187 Midland Ave.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>New Franklin</i>		State <i>OH</i>	Zip Code <i>44203</i>		M <i>03</i>	D <i>14</i>	Y <i>16</i>
Amount <i>35.50</i>							
Full Name of Contributor <i>Sylvia Ransweiler</i>						Registration Number, if PAC	
Street Address <i>2803 Nesmith Lake Blvd.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Akron</i>		State <i>OH</i>	Zip Code <i>44314</i>		M <i>03</i>	D <i>14</i>	Y <i>16</i>
Amount <i>5.00</i>							
Full Name of Contributor <i>Brandy Cash</i>						Registration Number, if PAC	
Street Address <i>1140 Kingston Rd.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Uniontown</i>		State <i>OH</i>	Zip Code <i>44685</i>		M <i>03</i>	D <i>14</i>	Y <i>16</i>
Amount <i>18.50</i>							
Full Name of Contributor <i>Gina Taylor</i>						Registration Number, if PAC	
Street Address <i>755 Denshire Dr. NW</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>	
City <i>Canal Fulton</i>		State <i>OH</i>	Zip Code <i>44614</i>		M <i>03</i>	D <i>14</i>	Y <i>16</i>
Amount <i>40.00</i>							
Full Name of Contributor <i>Gina Taylor</i>						Registration Number, if PAC	
Street Address <i>755 Denshire Dr. NW</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Canal Fulton</i>		State <i>OH</i>	Zip Code <i>44614</i>		M <i>03</i>	D <i>18</i>	Y <i>16</i>
Amount <i>58.00</i>							
Full Name of Contributor <i>Jennifer Rucker</i>						Registration Number, if PAC	
Street Address <i>788 Sylvania Dr.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Akron</i>		State <i>OH</i>	Zip Code <i>44319</i>		M <i>03</i>	D <i>18</i>	Y <i>16</i>
Amount <i>40.00</i>							

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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Citizens for Education</i>						
Full Name of Contributor <i>Jamie Kaderly</i>				Registration Number, if PAC		
Street Address <i>120 Odelle Dr.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>New Franklin</i>	State <i>OH</i>	Zip Code <i>44319</i>	M <i>03</i>	D <i>18</i>	Y <i>16</i>	Amount <i>38.00</i>
Full Name of Contributor <i>Gameday Sportswear</i>				Registration Number, if PAC		
Street Address <i>951 W. Nimisila Rd.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>	
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44319</i>	M <i>03</i>	D <i>18</i>	Y <i>16</i>	Amount <i>24.00</i>
Full Name of Contributor <i>Total Contributions from Form 31-E</i>				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>	
City	State <i>OH</i>	Zip Code	M	D	Y	Amount <i>3057.50</i>
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State <i>OH</i>	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 <i>OH</i>	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 <i>OH</i>	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 <i>OH</i>	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 <i>OH</i>	Zip Code	M	D	Y	Amount

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Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Citizens for Education</i>							
Full Name of Contributor <i>Contributors of \$25 or less</i>			Registration Number, if PAC				
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount <i>3057.50</i>
City		State	Zip Code	Form (Cash, Check, etc.) <i>Cash</i>			
Full Name of Contributor			Registration Number, if PAC				
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form (Cash, Check, etc.)			
Full Name of Contributor			Registration Number, if PAC				
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form (Cash, Check, etc.)			
Full Name of Contributor			Registration Number, if PAC				
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form (Cash, Check, etc.)			
Full Name of Contributor			Registration Number, if PAC				
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form (Cash, Check, etc.)			
Full Name of Contributor			Registration Number, if PAC				
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form (Cash, Check, etc.)			
Full Name of Contributor			Registration Number, if PAC				
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form (Cash, Check, etc.)			

* 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)]

Fill in the boxes below only on the last page for this event.
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

<i>3057</i>	<i>50</i>
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Total expenditures this event.

<i>944</i>	<i>35</i>
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Page Total \$ *2113.15*

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Citizens for Education			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Jennifer Taylor			
Street Address	Description of Item or Service	M	D
2257 Handforth St	Pancake mix + syrup	03	19
City	State	Y	Fair Market Value
Uniontown	OH	16	10.00
	Zip Code	Received at Fundraising Event?	
	44685	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Anthony Hite			
Street Address	Description of Item or Service	M	D
3228 Deborah Ct	pancake mix + syrup	03	19
City	State	Y	Fair Market Value
Uniontown	OH	16	10.00
	Zip Code	Received at Fundraising Event?	
	44685	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M	D
City	State	Y	Fair Market Value
	Zip Code	Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M	D
City	State	Y	Fair Market Value
	Zip Code	Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M	D
City	State	Y	Fair Market Value
	Zip Code	Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M	D
City	State	Y	Fair Market Value
	Zip Code	Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M	D
City	State	Y	Fair Market Value
	Zip Code	Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	

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Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full									
<i>Citizens for Education</i>									
To Whom Paid						M	D	Y	Amount
<i>Lamar Companies</i>						<i>03</i>	<i>14</i>	<i>16</i>	<i>300.00</i>
Address		Purpose							
<i>16560 Old Perkins Rd.</i>		<i>Billboard rental</i>							
City	State	Zip Code	Check Number						
<i>Baton Rouge</i>	<i>LA</i>	<i>70810</i>	<i>688</i>						
To Whom Paid						M	D	Y	Amount
<i>Barb Betz</i>						<i>03</i>	<i>14</i>	<i>16</i>	<i>328.46</i>
Address		Purpose							
<i>944 Proehl Dr.</i>		<i>Reimbursement For Bunny Breakfast Supplies</i>							
City	State	Zip Code	Check Number						
<i>Barberton</i>	<i>OH</i>	<i>44203</i>	<i>689</i>						
To Whom Paid						M	D	Y	Amount
<i>Kim Sherman</i>						<i>03</i>	<i>14</i>	<i>16</i>	<i>137.17</i>
Address		Purpose							
<i>1397 Vanderhoof Rd.</i>		<i>Reimbursement For Bunny Breakfast Supplies</i>							
City	State	Zip Code	Check Number						
<i>New Franklin</i>	<i>OH</i>	<i>44203</i>	<i>690</i>						
To Whom Paid						M	D	Y	Amount
<i>Gameday Sportswear</i>						<i>03</i>	<i>17</i>	<i>16</i>	<i>136.00</i>
Address		Purpose							
<i>951 W. Nimisila Rd.</i>		<i>Apparel - Sweatshirts & T-shirts</i>							
City	State	Zip Code	Check Number						
<i>Akron</i>	<i>OH</i>	<i>44319</i>	<i>692</i>						
To Whom Paid						M	D	Y	Amount
<i>Manchester Local Schools - Food Service</i>						<i>03</i>	<i>18</i>	<i>16</i>	<i>453.72</i>
Address		Purpose							
<i>437 W. Nimisila Rd.</i>		<i>Bunny Breakfast Supplies</i>							
City	State	Zip Code	Check Number						
<i>Akron</i>	<i>OH</i>	<i>44319</i>	<i>693</i>						
To Whom Paid						M	D	Y	Amount
<i>Karen Selzer</i>						<i>03</i>	<i>23</i>	<i>16</i>	<i>25.00</i>
Address		Purpose							
<i>5717 Eastview Dr.</i>		<i>Reimbursement - Bunny Breakfast Gift Card</i>							
City	State	Zip Code	Check Number						
<i>Clinton</i>	<i>OH</i>	<i>44216</i>	<i>694</i>						
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						

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Citizens for Education			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Stacie Kindeman			
Street Address	Description of Item or Service	M	D
5723 Sherwood Forest Dr	Forks, Knives, Pancake Mix ^{Syrup}	03	19
City	State	Y	Fair Market Value
Akron	OH	16	20.00
	Zip Code	Received at Fundraising Event?	
	44319	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Kristen Oakes			
Street Address	Description of Item or Service	M	D
1332 McTweed Lane	Pancake mix + syrup	03	19
City	State	Y	Fair Market Value
New Franklin	OH	16	15.00
	Zip Code	Received at Fundraising Event?	
	44203	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Mary Grandon			
Street Address	Description of Item or Service	M	D
6353 Kieb Dr	Syrup	03	19
City	State	Y	Fair Market Value
Clinton	OH	16	10.00
	Zip Code	Received at Fundraising Event?	
	44216	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Melisa Noiro			
Street Address	Description of Item or Service	M	D
1408 W. Nimisila Rd	Pancake Mix + Syrup	03	19
City	State	Y	Fair Market Value
Clinton	OH	16	10.00
	Zip Code	Received at Fundraising Event?	
	44216	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Desiree Beard			
Street Address	Description of Item or Service	M	D
6681 Kepler Rd	Pancake mix	03	19
City	State	Y	Fair Market Value
Clinton	OH	16	9.00
	Zip Code	Received at Fundraising Event?	
	44216	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Brandy Cash			
Street Address	Description of Item or Service	M	D
1140 Kingston Rd	Syrup	03	19
City	State	Y	Fair Market Value
Uniontown	OH	16	10.00
	Zip Code	Received at Fundraising Event?	
	44685	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Kathleen Esterle			
Street Address	Description of Item or Service	M	D
1251 Rose Circle Dr	Syrup	03	19
City	State	Y	Fair Market Value
Barberton	OH	16	10.00
	Zip Code	Received at Fundraising Event?	
	44203	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Robyn Miller			
Street Address	Description of Item or Service	M	D
471 Center Rd	Pancake mix + syrup	03	19
City	State	Y	Fair Market Value
Akron	OH	16	20.00
	Zip Code	Received at Fundraising Event?	
	44319	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

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