

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee Friends of Alex Pavloff						Registration Number, if PAC		
Full Name of Candidate Alexander Pavloff								
Street Address 710 Delaware Avenue					Office Sought Summit County Council		District At Large	
City Akron					State O H		Zip Code 44303	
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General	
	July		August		September		Termination	
	Monthly		Monthly		Monthly		Termination	
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		Annual Year
						M	D	Y
						1	1	0
						1	8	1
						6		

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	\$	9,120.36
2. Total monetary contributions (From Form No. 31-A)	\$	830.00
3. Total other income (From Form No. 31-A-2)	\$	
4. Total funds available (sum of lines 1-3)	\$	9,950.36
5. Total monetary expenditures (From Form No. 31-B)	\$	7,612.85
6. Balance on hand (sum of lines 4-5)	\$	2,337.51
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	\$	

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SUMMIT COUNTY
BOARD OF ELECTIONS

#242
BOARD OF ELECTIONS
AKRON, OHIO
2016 DEC 15 AM 9:06

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.

Robert C Berk, Treasurer _____ Signature _____ Date 12/13/16

Contribution pages 2

Expenditure pages 9

Other pages _____

Total pages 11

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Alex Pavloff						
Full Name of Contributor Lisa Kot				Registration Number, if PAC		
Street Address 858 Olde Orchard Dr		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Anedot	
City Tallmadge	State O H	Zip Code 44278	M 1	D 0	Y 17	Amount 25.00
Full Name of Contributor Nancy DeLambo-Collin				Registration Number, if PAC		
Street Address 2243 Liberty St		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Cash	
City Cuyahoga Falls	State O H	Zip Code 44221	M 1	D 0	Y 22	Amount 20.00
Full Name of Contributor Bernard Famorca				Registration Number, if PAC		
Street Address 3443 60th St, Apt 5c		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Anedot	
City Woodside	State N Y	Zip Code 11377	M 1	D 0	Y 24	Amount 20.00
Full Name of Contributor Ralph Paimisano				Registration Number, if PAC		
Street Address 4019 Hedgewood Dr		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Check	
City Medina	State O H	Zip Code 44256	M 1	D 0	Y 25	Amount 200.00
Full Name of Contributor Scot Stevenson				Registration Number, if PAC		
Street Address 639 East Baird Ave		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Check	
City Barberton	State O H	Zip Code 44203	M 1	D 0	Y 26	Amount 100.00
Full Name of Contributor Frances Buchholzer				Registration Number, if PAC		
Street Address 1820 Buchholzer Blvd		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Check	
City Akron	State O H	Zip Code 44310	M 1	D 0	Y 28	Amount 100.00
Full Name of Contributor Rob Nelson				Registration Number, if PAC		
Street Address 795 Weller Ave		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Anedot	
City Akron	State O H	Zip Code 44310	M 1	D 0	Y 30	Amount 25.00
Full Name of Contributor Greg Allison				Registration Number, if PAC		
Street Address 1724 Edgefield Rd		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Check	
City Lyndhurst	State O H	Zip Code 44124	M 1	D 1	Y 23	Amount 50.00

* 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 appear. [R.C. 3517.10(B)(4)]

Statement of Contributions Received

Prescribed by Secretary of State 3-05

Name of Committee or Full						
Friends of Alex Pavloff						
Full Name of Contributor				Registration Number, if PAC		
Ian Schwarber						
Street Address		Employer Occupation Labor Organization*			Form (Cash, Check, etc.)	
286 Melbourne Ave					Cash	
City	State	Zip Code	M	D	Y	Amount
Akron	OH	44313	1	1	0	216 40.00
Full Name of Contributor				Registration Number, if PAC		
John Blikle						
Street Address		Employer Occupation Labor Organization*			Form (Cash, Check, etc.)	
500 Grant St					Check	
City	State	Zip Code	M	D	Y	Amount
Akron	OH	44311	1	1	2	316 250.00
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

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Statement of Expenditures

Presented by Secretary of State 2 01

Name of Committee in Full										
Friends of Alex Pavloff										
To Whom Paid						M	D	Y	Amount	
Anedot						1	0	06	16	1.27
Address		Purpose								
P O Box 84314		On-line contribution processing								
City		State	Zip Code	Check Number						
Baton Rouge		L	A	70884	EFT					
To Whom Paid						M	D	Y	Amount	
Office Max						1	0	20	16	16.00
Address		Purpose								
37 N Cleveland-Massillon Rd		Paper for literature								
City		State	Zip Code	Check Number						
Akron		O	H	44333	Debit Card					
To Whom Paid						M	D	Y	Amount	
Staples						1	0	24	16	48.01
Address		Purpose								
4014 Medina Rd		Envelopes								
City		State	Zip Code	Check Number						
Akron		O	H	44333	Debit Card					
To Whom Paid						M	D	Y	Amount	
Google						1	0	26	16	50.00
Address		Purpose								
1600 Amphitheatre Pkwy		AdWords Advertising								
City		State	Zip Code	Check Number						
Mountain View		C	A	94043	EFT					
To Whom Paid						M	D	Y	Amount	
Anedot						1	0	27	16	1.08
Address		Purpose								
P O Box 84314		On-line contribution processing								
City		State	Zip Code	Check Number						
Baton Rouge		L	A	70884	EFT					
To Whom Paid						M	D	Y	Amount	
Staples						1	0	27	16	16.01
Address		Purpose								
4014 Medina Rd		Envelopes								
City		State	Zip Code	Check Number						
Akron		O	H	44333	Debit Card					
To Whom Paid						M	D	Y	Amount	
Facebook						1	0	27	16	750.01
Address		Purpose								
1 Hacker Way		Facebook Ads								
City		State	Zip Code	Check Number						
Menlo Park		C	A	94025	EFT					
To Whom Paid						M	D	Y	Amount	
Google						1	0	31	16	200.00
Address		Purpose								
1600 Amphitheatre Pkwy		AdWords Advertising								
City		State	Zip Code	Check Number						
Mountain View		C	A	94043	EFT					