

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee AKRON FIREFIGHTERS PAC						Registration Number, if PAC		
Full Name of Candidate								
Street Address 161 Massillon Rd					Office Sought		District	
City AKRON					State OH		Zip Code 44312	
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General	
	July Monthly		August Monthly		September Monthly		Termination	
						X		Annual Year 2016
								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

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	\$ 25,821	67
2. Total monetary contributions (From Form No. 31-A)	\$ 1,794	00
3. Total other income (From Form No. 31-A-2)	\$ 0	
4. Total funds available (Sum of lines 1, 2, & 3)	\$ 27,615	67
5. Total monetary expenditures (From Form No. 31-B)	\$ 0	
6. Balance on hand (Line 4 minus Line 5)	\$ 27,615	67
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.	\$	

OFFICIAL COPY
SUMMIT COUNTY
BOARD OF ELECTIONS

2017 JAN 31 AH10:42

BOARD OF ELECTIONS
AKRON, OHIO

580 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.

Joseph M. Puhlin
Print Name and Title (Treasurer and Deputy Treasurer only)

[Signature]
Signature

01/30/17
Date

Contribution pages _____	Expenditure pages _____	Other pages _____	Total pages _____
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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full									
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			
AKRON FIREFIGHTERS PAC									
Jeffrey A. ARMSTRONG							07/01/16 - 12/31/16		
369 Fulmer Ave							EFT		
AKRON	OH	44312				26. ⁰⁰			
STEVEN R BARKER									
164 Kenilworth DR							07/01/16 - 12/31/16		
164 Kenilworth DR							EFT		
AKRON	OH	44313				26. ⁰⁰			
JOHN E. BEAVERS									
322 Skyview							07/01/16 - 12/31/16		
322 Skyview							EFT		
AKRON	OH	44319				78. ⁰⁰			
Russell A. Brade									
4255 State Park Dr.							07/01/16 - 12/31/16		
4255 State Park Dr.							EFT		
NEW FRANKLIN	OH	44319				78. ⁰⁰			
Matthew Coleman									
725 Silvercrest Ave							07/01/16 - 12/31/16		
725 Silvercrest Ave							EFT		
AKRON	OH	44314				26. ⁰⁰			
DANIEL P. DeLUCA									
1567 Colenmant Ave							07/01/16 - 12/31/16		
1567 Colenmant Ave							EFT		
AKRON	OH	44301				78. ⁰⁰			
Michael J. DePaul									
2275 Eastwood Ave							07/01/16 - 12/31/16		
2275 Eastwood Ave							EFT		
AKRON	OH	44312				26. ⁰⁰			
JAMES P. Diestel									
1505 Jefferson Ave							07/01/16 - 12/31/16		
1505 Jefferson Ave							EFT		
AKRON	OH	44313				130. 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)]

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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	
AKRAW Firefighters PAC									
Steven P. Dolt 07/01/16 - 12/31/16									
1606 Ireland Ave							EFT		
AKRAW		OH	44301					26.00	
Wayne C Foster 07/01/16 - 12/31/16									
1922 Cherrywood Ln									
AKRAW							EFT		
AKRAW		OH	44312					26.00	
Stacie A. Frabotta 07/01/16 - 12/31/16									
3863 Glenridge Rd									
AKRAW							EFT		
AKRAW		OH	44319					78.00	
Daniel L. Corbett 07/01/16 - 12/31/16									
3805 Greentree Rd									
Stow							EFT		
Stow		OH	44224					26.00	
William E. Hailey 07/01/16 - 12/31/16									
942 Roslyn Ave									
AKRAW							EFT		
AKRAW		OH	44320					78.00	
Andrew R Hoch 07/01/16 - 12/31/16									
2270 Briwer Ave									
AKRAW							EFT		
AKRAW		OH	44308					78.00	
Robert M. Hoch 07/01/16 - 12/31/16									
233 Hawk Ave									
AKRAW							EFT		
AKRAW		OH	44312					26.00	
Michael Krawek 07/01/16 - 12/31/16									
2136 Field circle Ave									
AKRAW							EFT		
AKRAW		OH	44312					26.00	

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Name of Committee in Full AKRON Firefighters PAC						
Full Name of Contributor Charles J. Lattimer				Registration Number, if PAC 07/01/16 - 12/31/16		
Street Address 1205 Coarmin Ave		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) EFT	
City AKRON	State OH	Zip Code 44312	M	D	Y	Amount 26.00
Full Name of Contributor Raymond W. Martin				Registration Number, if PAC 07/01/16 - 12/31/16		
Street Address 2155 FOREST OAK DR		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) EFT	
City AKRON	State OH	Zip Code 44312	M	D	Y	Amount 130.00
Full Name of Contributor DAVID E. O'NEAL				Registration Number, if PAC 07/01/16 - 12/31/16		
Street Address 497 TAMICAMI TRAIL		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) EFT	
City AKRON	State OH	Zip Code 44303	M	D	Y	Amount 78.00
Full Name of Contributor Mark S. Ozimek				Registration Number, if PAC 07/01/16 - 12/31/16		
Street Address 627 Fouse Ave		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) EFT	
City AKRON	State OH	Zip Code 44310	M	D	Y	Amount 26.00
Full Name of Contributor SCOTT C. PASCU				Registration Number, if PAC 07/01/16 - 12/31/16		
Street Address 2424 Serravalle ST		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) EFT	
City UNIACHTOWN	State OH	Zip Code 44685	M	D	Y	Amount 26.00
Full Name of Contributor Douglas M. Price III				Registration Number, if PAC 07/01/16 - 12/31/16		
Street Address 1643 ROCKFORD		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) EFT	
City AKRON	State OH	Zip Code 44301	M	D	Y	Amount 26.00
Full Name of Contributor Brian L. Reedy				Registration Number, if PAC 07/01/16 - 12/31/16		
Street Address 2318 10TH ST SW		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) EFT	
City AKRON	State OH	Zip Code 44314	M	D	Y	Amount 130.00
Full Name of Contributor William T. Romano				Registration Number, if PAC 07/01/16 - 12/31/16		
Street Address 2039 Stabler Ave		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) EFT	
City AKRON	State OH	Zip Code 44313	M	D	Y	Amount 234.00

* 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)]

