

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <b>FRIENDS OF MARY STORMER COMMITTEE</b>							Registration Number, if PAC		
Full Name of Candidate <b>MARY A. STORMER</b>									
Street Address <b>4509 REX LAKE DRIVE</b>					Office Sought			District <b>SUMMIT</b>	
City <b>AKRON</b>					State <b>O H</b>		Zip Code <b>44319</b>		
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input type="checkbox"/> Post-Primary	<input type="checkbox"/> Pre-General	<input type="checkbox"/> Post-General	<input checked="" type="checkbox"/> X	Annual Year <b>2016</b>		Semianual	
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly	<input type="checkbox"/> 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		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 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	\$	2,355.18
2. Total monetary contributions (From Form No. 31-A)	\$	
3. Total other income (From Form No. 31-A-2)	\$	0.00
4. Total funds available (sum of lines 1, 2, 3)	\$	2,355.18
5. Total monetary expenditures (From Form No. 31-B)	\$	0.00
6. Balance on hand (From Form No. 31-C)	\$	2,355.18
7. Value of in-kind contributions received (From Form No. 31-D)	\$	0.00
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	10,000.00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	1,594.68
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**

2017 JAN 31 PM 1:05  
BOARD OF ELECTIONS  
AKRON, OHIO  
# 675 BAB

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

Mary A Stormer      Mary A Stormer      1/31/17  
Print Name and Title (Treasurer and Deputy Treasurer only)      Signature      Date

Contribution pages <u>0</u>	Expenditure pages <u>2</u>	Other pages <u>2</u>	Total pages <u>4</u>
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## Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee <b>FRIENDS OF MARY STORMER COMMITTEE</b>											
To Whom Owed <b>BARRY &amp; MARY STORMER</b>						Prior Amount <b>459.95</b>		Amt. Incurred this Period <del>0</del> <b>459.93</b> <span style="float: right;">-MMS</span>			
Address <b>4509 REX LAKE DRIVE</b>						Item or Purpose for Debt <b>SUPPLIES</b>		Outstanding Balance <b>459.95</b>			
City <b>AKRON</b>				State <b>OH</b>	Zip Code <b>44319</b>						
Date Debt was originally Incurred						M		D		Y	
						<b>08</b>		<b>25</b>		<b>08</b>	
Registration Number, if PAC						M		D		Y	
To Whom Owed <b>BARRY &amp; MARY STORMER</b>						Prior Amount <b>459.95</b>		Amt. Incurred this Period <del>0</del> <b>102.43</b>			
Address <b>4509 REX LAKE DRIVE</b>						Item or Purpose for Debt <b>SUPPLIES</b>		Outstanding Balance <b>562.38</b>			
City <b>AKRON</b>				State <b>OH</b>	Zip Code <b>44319</b>						
Date Debt was originally Incurred						M		D		Y	
						<b>09</b>		<b>20</b>		<b>08</b>	
Registration Number, if PAC						M		D		Y	
To Whom Owed <b>BARRY &amp; MARY STORMER</b>						Prior Amount <b>562.38</b>		Amt. Incurred this Period <del>0</del> <b>92.80</b>			
Address <b>4509 REX LAKE DRIVE</b>						Item or Purpose for Debt <b>SIGN SUPPLIES</b>		Outstanding Balance <b>655.18</b>			
City <b>AKRON</b>				State <b>OH</b>	Zip Code <b>44319</b>						
Date Debt was originally Incurred						M		D		Y	
						<b>09</b>		<b>21</b>		<b>08</b>	
Registration Number, if PAC						M		D		Y	

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made this period to the Statement of Expenditures (Form No. 31-B). Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-I-1). Transfer total outstanding debt amount to the cover page.

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

Total Outstanding Balance \$ 655.18 (also record on cover page)

# Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee <b>FRIENDS OF MARY STORMER COMMITTEE</b>										
To Whom Owed <b>BARRY &amp; MARY STORMER</b>					Prior Amount <b>655.18</b>			Amt. Incurred this Period <b>0 394.19</b>		
Address <b>4509 REX LAKE DRIVE</b>					Item or Purpose for Debt <b>promo items</b>			Outstanding Balance <b>1,049.37</b>		
City <b>AKRON</b>			State <b>O H</b>	Zip Code <b>44319</b>		Payments Made This Period				
Date Debt was originally Incurred					M	D	Y	Date		Amount
Registration Number, if PAC					M	D	Y	Date		Amount
Registration Number, if PAC					M	D	Y	Date		Amount
To Whom Owed <b>BARRY &amp; MARY STORMER</b>					Prior Amount <b>1,049.37</b>			Amt. Incurred this Period <b>0 78.77</b>		
Address <b>4509 REX LAKE DRIVE</b>					Item or Purpose for Debt <b>SUPPLIES</b>			Outstanding Balance <b>1,128.14</b>		
City <b>AKRON</b>			State <b>O H</b>	Zip Code <b>44319</b>		Payments Made This Period				
Date Debt was originally Incurred					M	D	Y	Date		Amount
Registration Number, if PAC					M	D	Y	Date		Amount
Registration Number, if PAC					M	D	Y	Date		Amount
To Whom Owed <b>BARRY &amp; MARY STORMER</b>					Prior Amount <b>1,128.14</b>			Amt. Incurred this Period <b>0 444.19</b>		
Address <b>4509 REX LAKE DRIVE</b>					Item or Purpose for Debt <b>promo items</b>			Outstanding Balance <b>1,572.33</b>		
City <b>AKRON</b>			State <b>O H</b>	Zip Code <b>44319</b>		Payments Made This Period				
Date Debt was originally Incurred					M	D	Y	Date		Amount
Registration Number, if PAC					M	D	Y	Date		Amount
Registration Number, if PAC					M	D	Y	Date		Amount

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made this period to the Statement of Expenditures (Form No. 31-B). Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.

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

Total Outstanding Balance \$ 1,572.33 (also record on cover page)

## Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee <b>FRIENDS OF MARY STORMER COMMITTEE</b>											
To Whom Owed <b>BARRY &amp; MARY STORMER</b>					Prior Amount <b>1,572.<sup>33</sup></b>			Amt. Incurred this Period <b>0 22.35</b>			
Address <b>4509 REX LAKE DRIVE</b>					Item or Purpose for Debt <b>SUPPLIES</b>			Outstanding Balance <b>1594.68</b>			
City <b>AKRON</b>			State <b>OH</b>	Zip Code <b>44319</b>		Payments Made This Period					
Date Debt was originally Incurred					M	D	Y	M	D	Y	\$
					0	9	2	9	0	8	
Registration Number, if PAC					M	D	Y				
					M	D	Y				
To Whom Owed					Prior Amount			Amt. Incurred this Period			
Address					Item or Purpose for Debt			Outstanding Balance			
City			State	Zip Code		Payments Made This Period					
Date Debt was originally Incurred					M	D	Y	M	D	Y	\$
Registration Number, if PAC					M	D	Y				
					M	D	Y				
To Whom Owed					Prior Amount			Amt. Incurred this Period			
Address					Item or Purpose for Debt			Outstanding Balance			
City			State	Zip Code		Payments Made This Period					
Date Debt was originally Incurred					M	D	Y	M	D	Y	\$
Registration Number, if PAC					M	D	Y				
					M	D	Y				

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made this period to the Statement of Expenditures (Form No. 31-B). Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.

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

Total Outstanding Balance \$ 1594.68 (also record on cover page)

## Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee <b>FRIENDS OF AMRY STORMER COMMITTEE</b>												
From Whom Received <b>BARRY STORMER</b>								Prior Amount <b>10,000.00</b>		Amt. Incurred this Period		
Address <b>4509 REX DRIVE DRIVE</b>										Outstanding Balance <b>10,000.00</b>		
City <b>AKRON</b>		State <b>OH</b>	Zip Code <b>44319</b>		Loans Received This Period				Payments This Period			
					Date		Amount		Date		Amount	
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
0   6   1   6   0   8												
Registration Number, if PAC					M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*					M	D	Y		M	D	Y	
From Whom Received								Prior Amount		Amt. Incurred this Period		
Address										Outstanding Balance		
City		State	Zip Code		Loans Received This Period				Payments This Period			
					Date		Amount		Date		Amount	
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC					M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*					M	D	Y		M	D	Y	
From Whom Received								Prior Amount		Amt. Incurred this Period		
Address										Outstanding Balance		
City		State	Zip Code		Loans Received This Period				Payments This Period			
					Date		Amount		Date		Amount	
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC					M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*					M	D	Y		M	D	Y	

\* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees donate 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)

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 31-A-2). Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Total Outstanding Balance to the cover page (Form No. 30-A).

- 1 Total prior amount \$ 10,000.00
- 2 Total received this period \$ 0.00 (To Form No. 31-A-2)
- 3 Total Payments this Period \$ 0.00 (also record on Form 31-B)
- 4 Total Outstanding Balance \$ 10,000.00 (To Form No. 30-A)