

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee Friends and Neighbors of Alan Hipps						Registration Number, if PAC	
Full Name of Candidate Alan Eugene Hipps							
Street Address 64 Houghton Road				Office Sought WARD A Council		District Northfield village	
City Northfield				State OH		Zip Code 44067	
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"/> Annual Year	2018	
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly	<input type="checkbox"/> Termination	<input type="checkbox"/> 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		1 ^M	1 ^D	0 ^Y 5

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	\$	222.73
2. Total monetary contributions (From Form No. 31-A)	\$	0.00
3. Total other income (From Form No. 31-A-2)	\$	0.00
4. Total funds available (sum of lines 1, 2, 3)	\$	222.73
5. Total monetary expenditures (From Form No. 31-B)	\$	0.00
6. Balance on hand (line 4 minus line 5)	\$	0.00
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	0.00
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	0.00
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	100.00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	285.31
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	0.00
12. Value of independent expenditures made (From Form No. 31-U)	\$	0.00
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

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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.

Alan E. Hipps
Print Name and Title (Treasurer and Deputy Treasurer only)

Alan E Hipps
Signature

01-16-2017
Date

Contribution pages 0

Expenditure pages 0

Other pages 3

Total pages 3

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee Friends and Neighbors of Alan Hipps																				
From Whom Received Alan E. Hipps							Prior Amount 0.00			Amt. Incurred this Period 100.00										
Address 64 Houghton Road										Outstanding Balance 100.00										
City Northfield		State o h	Zip Code 44067		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	2	4	1	3		0	6	2	4	1	3	100					0
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 \$ 0.00
- 2 Total received this period \$ 100.00 (To Form No. 31-A-2)
- 3 Total Payments this Period \$ 0.00 (also record on Form 31-B)
- 4 Total Outstanding Balance \$ 100.00 (To Form No. 30-A)

Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee Friends and Neighbors of Alan Hipps													
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		Amount					
Date Debt was originally Incurred						M	D	Y	\$				
Registration Number, if PAC						M	D	Y					
						M	D	Y					
To Whom Owed Alan Hipps						285.31		0.00					
Address 64 Houghton Road						Signs		285.31					
City Northfield			OH	44067		Payments Made This Period							
						Date		Amount					
Date Debt was originally Incurred						0	9	2	6	1	3	\$	0.00
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		Amount					
Date Debt was originally Incurred						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 \$ 0.00 (also record on Form 31-B)

Total Outstanding Balance \$ 285.31 (also record on cover page)