

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee OHIO GOTV						Registration Number, if PAC					
Full Name of Candidate											
Street Address 2206 NORTH PARK AVE						Office Sought			District		
City WARREN						State O H		Zip Code 44483			
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General		Annual Year		
	July Monthly		August Monthly		September Monthly		Termination		X Semiannual 2017		
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 0 6	D 3 0	Y 1 7	

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	\$ 1,635.49
2. Total monetary contributions (From Form No. 31-A)	\$ 50.00
3. Total other income (From Form No. 31-A-1)	\$ 0.00
4. Total funds available (sum of lines 1, 2, & 3)	\$ 1,685.49
5. Total monetary expenditures (From Form No. 31-B)	\$ 0.00
6. Balance on hand (line 4 minus line 5)	\$ 1,685.49
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)	\$ 0.00
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
OF ELECTIONS

AKRON, OHIO

1000 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.

Roy L Manley, Sr., Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

07/01/2017

Date

Contribution pages <u>1</u>

Expenditure pages <u>0</u>

Other pages <u>1</u>

Total pages <u>2</u>

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full OHIO GOTV							
Full Name of Contributor SYKES FOR OFFICE						Registration Number, if PAC	
Street Address 133 FURNANCE RUN DRIVE			Employer/Occupation/Labor Organization* CAMPAIGN COMMITTEE			Form (Cash, Check, etc.) CHECK	
City AKRON		State O H	Zip Code 44307	M 0 3	D 2 1	Y 1 7	Amount 25.00
Full Name of Contributor VERNON SYKES						Registration Number, if PAC	
Street Address 133 FURNANCE RUN DRIVE			Employer/Occupation/Labor Organization* STATE SENATOR			Form (Cash, Check, etc.) CHECK	
City AKRON		State O H	Zip Code 44307	M 0 6	D 0 2	Y 1 7	Amount 25.00
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
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

* 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)]