

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee Committee To Elect John Pribonic						Registration Number, if PAC	
Full Name of Candidate John David Pribonic							
Street Address 4210 Cheval Circle				Office Sought Stow City Council At-Large		District	
City Stow				State Ohio		Zip Code 44224	
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 type="checkbox"/> Annual Year		
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly	<input type="checkbox"/> Termination	<input checked="" type="checkbox"/> 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		11	03	15

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	\$	933	99
2. Total monetary contributions (From Form No. 31-A)	\$	5	-
3. Total other income (From Form No. 31-A-2)	\$	0	
4. Total funds available (sum of lines 1, 2, 3)	\$	938	99
5. Total monetary expenditures (From Form No. 31-B)	\$	12	-
6. Balance on hand (Lines 4 minus line 5)	\$	926	99
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	286	64
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	0	
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	1,000	-
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	0	
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	0	
12. Value of independent expenditures made (From Form No. 31-U)	\$	0	
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period	\$	0	

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SUMMIT COUNTY
BOARD OF ELECTIONS

2017 JUL 28 PM 12:31

#1151 Ave

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.

Cynthia A. Pribonic Treasurer
Print Name and Title (Treasurer and Deputy Treasurer only)

Cynthia A. Pribonic
Signature

7/27/17
Date

Contribution pages 2

Expenditure pages 4

Other pages 8

Total pages 11

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee To Elect John Pribenic						Registration Number, if PAC	
Full Name of Contributor John D. Pribenic						Form (Cash, Check, etc.) Check	
Street Address 4210 Cheval Circle			Employer/Occupation/Labor Organization*			Amount	
City Stow	State Ohio	Zip Code 44224	M 0	D 1	Y 25	Y 17	#5-
Full Name of Contributor						Registration Number, if PAC	
Street Address						Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC	
Street Address						Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC	
Street Address						Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC	
Street Address						Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC	
Street Address						Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC	
Street Address						Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC	
Street Address						Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC	
Street Address						Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	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 also appear. [R.C. 3517.10(B)(4)]

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Committee To Elect John Priboinic										
To Whom Paid Citizens Bank							M	D	Y	Amount \$2.00
Address 3323 Kent Rd			Purpose Banking Expense				0		17	
City Stow		State Stow	Zip Code 44224		Check Number EFT					
To Whom Paid Citizens Bank							M	D	Y	Amount \$2.00
Address 3323 Kent Rd			Purpose Banking Expense				0		17	
City Stow		State Stow	Zip Code 44224		Check Number EFT					
To Whom Paid Citizens Bank							M	D	Y	Amount \$2.00
Address 3323 Kent Rd			Purpose Banking Expense				0		17	
City Stow		State Stow	Zip Code 44224		Check Number EFT					
To Whom Paid Citizens Bank							M	D	Y	Amount \$2.00
Address 3323 Kent Rd			Purpose Banking Expense				0		17	
City Stow		State Stow	Zip Code 44224		Check Number EFT					
To Whom Paid Citizens Bank							M	D	Y	Amount \$2.00
Address 3323 Kent Rd			Purpose Banking Expense				0		17	
City Stow		State Stow	Zip Code 44224		Check Number EFT					
To Whom Paid Citizens Bank							M	D	Y	Amount \$2.00
Address 3323 Kent Rd			Purpose Banking Expense				0		17	
City Stow		State Stow	Zip Code 44224		Check Number EFT					
To Whom Paid							M	D	Y	Amount
Address			Purpose							
City		State	Zip Code		Check Number					
To Whom Paid							M	D	Y	Amount
Address			Purpose							
City		State	Zip Code		Check Number					

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee Committee To Elect John Pribonic										Prior Amount \$1,000 -		Amt. Incurred this Period		
From Whom Received John D. Pribonic										Outstanding Balance \$1000-				
Address 4210 Chewal Circle														
City Stow		State OH		Zip Code 44224		Loans Received This Period				Payments This Period				
						Date		Amount		Date		Amount		
						M	D	Y	S		M	D	Y	S
Date Loan was originally incurred 06 21 11														
Registration Number, if PAC														
Employer/Occupation/Labor Organization*														
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		
						M	D	Y	S		M	D	Y	S
Date Loan was originally incurred														
Registration Number, if PAC														
Employer/Occupation/Labor Organization*														
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		
						M	D	Y	S		M	D	Y	S
Date Loan was originally incurred														
Registration Number, if PAC														
Employer/Occupation/Labor Organization*														

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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 Outstanding Balance to the Cover page (Form No. 30-A).

¹ Total prior amount \$ 1000 -

² Total received this period \$ 0 (To Form No. 31-A-2)

³ Total payments this period \$ 0 (To Form No. 31-B)

⁴ Total Outstanding Balance \$ 1000 - (To Form No. 30-A)

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Committee To Elect John Pribonic			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
John D. Pribonic			
Street Address	Description of Item or Service	M D Y	Fair Market Value
4210 Cheval Circle	SMF Chamber Dues	0 1 3 1 1 7	\$57-
City	State Zip Code	Received at Fundraising Event?	
Stow	Ohio 44224	<input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Cynthia Pribonic			
Street Address	Description of Item or Service	M D Y	Fair Market Value
4210 Cheval Circle	Parade Candy	0 6 2 9 1 7	\$179.64
City	State Zip Code	Received at Fundraising Event?	
Stow	Ohio 44224	<input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Cynthia Pribonic			
Street Address	Description of Item or Service	M D Y	Fair Market Value
4210 Cheval Circle	Parade Fee	0 6 2 9 1 7	\$50-
City	State Zip Code	Received at Fundraising Event?	
Stow	Ohio 44224	<input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M D Y	Fair Market Value
City	State Zip Code	Received at Fundraising Event?	
		<input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M D Y	Fair Market Value
City	State Zip Code	Received at Fundraising Event?	
		<input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M D Y	Fair Market Value
City	State Zip Code	Received at Fundraising Event?	
		<input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M D Y	Fair Market Value
City	State Zip Code	Received at Fundraising Event?	
		<input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M D Y	Fair Market Value
City	State Zip Code	Received at Fundraising Event?	
		<input type="radio"/> YES <input type="radio"/> NO	

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