

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Ohioans for Mike Rasor</b>						Registration Number, if PAC					
Full Name of Candidate <b>Mike Rasor</b>											
Street Address <b>4312 Eagle Ave.</b>						Office Sought <b>Council at-large</b>			District <b>Stow</b>		
City <b>Stow</b>						State <b>OH</b>		Zip Code <b>44224</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 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		1 <sup>M</sup>	1	0 <sup>D</sup>	7	1 <sup>Y</sup>	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 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	\$	\$2,525.91
2. Total monetary contributions (From Form No. 31-A)	\$	\$18,941.11
3. Total other income (From Form No. 31-A-2)	\$	\$0.00
4. Total funds available (sum of lines 1, 2, 3)	\$	\$21,467.02
5. Total monetary expenditures (From Form No. 31-B)	\$	\$6,633.76
6. Balance on hand (line 4 minus line 5)	\$	\$14,833.26
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)	\$	\$0.00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	\$0.00
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	\$	\$0.00

23,941.11 MR  
26,467.02 MR  
19,833.26 MR

#1155 Avc  
AKRON, OHIO  
2017 JUL 28 PM 2:34

OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS

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.

Mike Rasor, Treasurer  
Print Name and Title (Treasurer and Deputy Treasurer only)

  
Signature

7/27/2017  
Date

Contribution pages 21

Expenditure pages 5

Other pages \_\_\_\_\_

Total pages 26

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>						
Full Name of Contributor <b>Terry Bedell</b>				Registration Number, if PAC		
Street Address <b>1508 Bluebird</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Stow</b>	State <b>OH</b>	Zip Code <b>44224</b>	M <b>0</b>	D <b>7</b>	Y <b>0</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>John Dyer</b>				Registration Number, if PAC		
Street Address <b>30455 Solon Road</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Solon</b>	State <b>OH</b>	Zip Code <b>44139</b>	M <b>0</b>	D <b>7</b>	Y <b>0</b>	Amount <b>\$250.00</b>
Full Name of Contributor <b>Nancy Marhofer</b>				Registration Number, if PAC		
Street Address <b>226 Cackler Road</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Streetsboro</b>	State <b>OH</b>	Zip Code <b>44241</b>	M <b>0</b>	D <b>7</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Contributions from 4/11/17 Fundraiser</b>				Registration Number, if PAC		
Street Address <b>N/A</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Mixed</b>	
City <b>N/A</b>	State <b>OH</b>	Zip Code	M	D	Y	Amount <b>\$18,566.11</b>
Full Name of Contributor <b>JOHN ONG</b>				Registration Number, if PAC		
Street Address <b>230 AURORA ST.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>HUDSON</b>	State <b>OH</b>	Zip Code <b>44236</b>	M <b>0</b>	D <b>7</b>	Y <b>2</b>	Amount <b>\$5,000.00</b>
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State <b>OH</b>	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 <b>OH</b>	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 <b>OH</b>	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 also appear. [R.C. 3517.10(B)(4)]

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full				
Ohioans for Mike Rasor				
Full Name of Contributor			Registration Number, if PAC	
Tim Abel				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
4004 ENCELL DR			0   4   1   1   1   7	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Copley	OH	44321	Paypal	
Full Name of Contributor			Registration Number, if PAC	
Josie Adams				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
4982 Lake View Drive			0   4   1   1   1   7	\$50.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Peninsula	OH		Cash	
Full Name of Contributor			Registration Number, if PAC	
Linda Alexander				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
3922 Lake Run			0   4   1   1   1   7	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Check	
Full Name of Contributor			Registration Number, if PAC	
Dennis Allieri				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
3533 Kent Road			0   4   1   1   1   7	\$40.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Cash	
Full Name of Contributor			Registration Number, if PAC	
Linda Anderson				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
4079 Hummingbird			0   4   1   1   1   7	\$30.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Check	
Full Name of Contributor			Registration Number, if PAC	
Rick Archer				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
4681 TURNBERRY TRL			0   4   1   1   1   7	\$20.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Cash	
Full Name of Contributor			Registration Number, if PAC	
Rod Armstrong				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
1316 Ritchie			0   4   1   1   1   7	\$60.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Cash	

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Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 400.00

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Ohioans for Mike Rasor							
Full Name of Contributor				Registration Number, if PAC			
Karen Arshinkoff							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
355 W. Streetsboro				0	4	1117	\$40.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Hudson		OH	44236	Check			
Full Name of Contributor				Registration Number, if PAC			
James Aussem							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
31780 Gardenside Dr.				0	4	1117	\$200.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Avon Lake		OH	44012	Check			
Full Name of Contributor				Registration Number, if PAC			
Hari Balaji							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
175 East Orange Hill Circle				0	4	1117	\$250.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Orange		OH	44022	Check			
Full Name of Contributor				Registration Number, if PAC			
Joseph Bastolla							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
4599 Shaw Road Ext				0	4	1117	\$200.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Akron		OH	44333	Cash			
Full Name of Contributor				Registration Number, if PAC			
Rich Beddell							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1390 MOCKINGBIRD TRL				0	4	1117	\$25.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			
Full Name of Contributor				Registration Number, if PAC			
Don Bettio							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
4155 Osage				0	4	1117	\$35.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	\$25check/\$10cash			
Full Name of Contributor				Registration Number, if PAC			
Edward Bond							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
11545 Coppers Run				0	4	1117	\$125.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Strongsville		OH	44149	Check			

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

\$0.00

Total expenditures this event

\$0.00

Page Total \$ 875.00

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full				
Ohioans for Mike Rasor				
Full Name of Contributor			Registration Number, if PAC	
Alex Bryan				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
4674 TRILLIUM DR			0   4   1   1   1   7	\$45.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	\$20check/\$25cash	
Full Name of Contributor			Registration Number, if PAC	
Scott Buck				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
3825 Greentree			0   4   1   1   1   7	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Check	
Full Name of Contributor			Registration Number, if PAC	
Shon Christy				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
1961 E ARNDALE RD			0   4   1   1   1   7	\$25.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Check	
Full Name of Contributor			Registration Number, if PAC	
Richard Coe				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
1311 East Main Street			0   4   1   1   1   7	\$25.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Ravenna	OH	44266	Check	
Full Name of Contributor			Registration Number, if PAC	
Michael Cohan				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
1106 West Forest Road			0   4   1   1   1   7	\$250.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Lakewood	OH	44107	Check	
Full Name of Contributor			Registration Number, if PAC	
Gordon Dean				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
1308 Goldfinch			0   4   1   1   1   7	\$30.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Cash	
Full Name of Contributor			Registration Number, if PAC	
Ross DeAngelis				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
2503 Blue Ash Avenue NW			0   4   1   1   1   7	\$250.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Canton	OH	44708	Paypal	

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 725.00

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>					
Full Name of Contributor <b>Tom DeAngelis</b>				Registration Number, if PAC	
Street Address <b>5447 Serra Vista</b>		Employer/Occupation/Labor Organization*		M   D   Y	Amount
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	0   4   1   1   1   7	\$270.00
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Max Dehn</b>				Registration Number, if PAC	
Street Address <b>5079 West 7th Street</b>		Employer/Occupation/Labor Organization*		M   D   Y	Amount
City <b>Brooklyn Heights</b>		State <b>OH</b>	Zip Code <b>44131</b>	0   4   1   1   1   7	\$100.00
Form (Cash, Check, etc.) <b>Paypal</b>					
Full Name of Contributor <b>Nanci Dillen</b>				Registration Number, if PAC	
Street Address <b>209 Milford Cir</b>		Employer/Occupation/Labor Organization*		M   D   Y	Amount
City <b>Moorestville</b>		State <b>NC</b>	Zip Code <b>28117</b>	0   4   1   1   1   7	\$100.00
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Douglas DiPalma</b>				Registration Number, if PAC	
Street Address <b>9639 Creawood Forest</b>		Employer/Occupation/Labor Organization*		M   D   Y	Amount
City <b>Waite Hill</b>		State <b>OH</b>	Zip Code <b>44094</b>	0   4   1   1   1   7	\$100.00
Form (Cash, Check, etc.) <b>Paypal</b>					
Full Name of Contributor <b>Michael Cohan</b>				Registration Number, if PAC	
Street Address <b>1106 West Forest Road</b>		Employer/Occupation/Labor Organization*		M   D   Y	Amount
City <b>Lakewood</b>		State <b>OH</b>	Zip Code <b>44107</b>	0   4   1   1   1   7	\$250.00
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Michael A. Diskin</b>				Registration Number, if PAC	
Street Address <b>10421 Industrial Drive</b>		Employer/Occupation/Labor Organization*		M   D   Y	Amount
City <b>Garrettsville</b>		State <b>OH</b>	Zip Code <b>44231</b>	0   4   1   1   1   7	\$111.11
Form (Cash, Check, etc.) <b>Paypal</b>					
Full Name of Contributor <b>Michael E. Diskin</b>				Registration Number, if PAC	
Street Address <b>10421 Industrial Drive</b>		Employer/Occupation/Labor Organization*		M   D   Y	Amount
City <b>Garrettsville</b>		State <b>OH</b>	Zip Code <b>44231</b>	0   4   1   1   1   7	\$20.00
Form (Cash, Check, etc.) <b>Check</b>					

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Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

**\$0.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **\$951.11**

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>					
Full Name of Contributor <b>John Durkos</b>				Registration Number, if PAC	
Street Address <b>2516 Mallory</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   1   1   1   7</b>	Amount <b>\$20.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Chip Erb</b>				Registration Number, if PAC	
Street Address <b>330 Morewood Parkway</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   1   1   1   7</b>	Amount <b>\$25.00</b>
City <b>Rocky River</b>		State <b>OH</b>	Zip Code <b>44116</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Ray Evans</b>				Registration Number, if PAC	
Street Address <b>1478 WHIPPOORWILL TRL</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   1   1   1   7</b>	Amount <b>\$20.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Bill Flinta</b>				Registration Number, if PAC	
Street Address <b>4182 LEEWOOD RD</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   1   1   1   7</b>	Amount <b>\$25.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Don Folino</b>				Registration Number, if PAC	
Street Address <b>7630 Bunker Hill Road</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   1   1   1   7</b>	Amount <b>\$25.00</b>
City <b>Middleburg Heights</b>		State <b>OH</b>	Zip Code <b>44130</b>	Form (Cash, Check, etc.) <b>Paypal</b>	
Full Name of Contributor <b>Tom Fox</b>				Registration Number, if PAC	
Street Address <b>787 White Pond Dr.</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   1   1   1   7</b>	Amount <b>\$50.00</b>
City <b>Akron</b>		State <b>OH</b>	Zip Code <b>44320</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Roger Frantz</b>				Registration Number, if PAC	
Street Address <b>2214 Norman</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   1   1   1   7</b>	Amount <b>\$20.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	

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Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

**\$0.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **185.00**

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>												
Full Name of Contributor <b>Lynn Fritz</b>			Registration Number, if PAC									
Street Address <b>4679 Markwood</b>		Employer/Occupation/Labor Organization*		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px;">M</td> <td style="width: 20px;">D</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Amount</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">4</td> <td style="text-align: center;">11</td> <td style="text-align: right;">\$100.00</td> </tr> </table>	M	D	Y	Amount	0	4	11	\$100.00
M	D	Y	Amount									
0	4	11	\$100.00									
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>								
Full Name of Contributor <b>Jeff Frye</b>			Registration Number, if PAC									
Street Address <b>3459 Madison</b>		Employer/Occupation/Labor Organization*		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px;">M</td> <td style="width: 20px;">D</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Amount</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">4</td> <td style="text-align: center;">11</td> <td style="text-align: right;">\$250.00</td> </tr> </table>	M	D	Y	Amount	0	4	11	\$250.00
M	D	Y	Amount									
0	4	11	\$250.00									
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>								
Full Name of Contributor <b>Michael Fulmer</b>			Registration Number, if PAC									
Street Address <b>4307 Mallard</b>		Employer/Occupation/Labor Organization*		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px;">M</td> <td style="width: 20px;">D</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Amount</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">4</td> <td style="text-align: center;">11</td> <td style="text-align: right;">\$70.00</td> </tr> </table>	M	D	Y	Amount	0	4	11	\$70.00
M	D	Y	Amount									
0	4	11	\$70.00									
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Cash</b>								
Full Name of Contributor <b>Michael Gabrail</b>			Registration Number, if PAC									
Street Address <b>4821 ARBOUR GREEN DR</b>		Employer/Occupation/Labor Organization*		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px;">M</td> <td style="width: 20px;">D</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Amount</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">4</td> <td style="text-align: center;">11</td> <td style="text-align: right;">\$3,500.00</td> </tr> </table>	M	D	Y	Amount	0	4	11	\$3,500.00
M	D	Y	Amount									
0	4	11	\$3,500.00									
City <b>Akron</b>		State <b>OH</b>	Zip Code <b>44333</b>	Form (Cash, Check, etc.) <b>Check</b>								
Full Name of Contributor <b>Jeff Gallup</b>			Registration Number, if PAC									
Street Address <b>29125 Bolingbrook Road</b>		Employer/Occupation/Labor Organization*		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px;">M</td> <td style="width: 20px;">D</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Amount</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">4</td> <td style="text-align: center;">11</td> <td style="text-align: right;">\$20.00</td> </tr> </table>	M	D	Y	Amount	0	4	11	\$20.00
M	D	Y	Amount									
0	4	11	\$20.00									
City <b>Pepper Pike</b>		State <b>OH</b>	Zip Code <b>44124</b>	Form (Cash, Check, etc.) <b>Check</b>								
Full Name of Contributor <b>Kevin Garlock</b>			Registration Number, if PAC									
Street Address <b>4954 LAKE BREEZE LANDING</b>		Employer/Occupation/Labor Organization*		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px;">M</td> <td style="width: 20px;">D</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Amount</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">4</td> <td style="text-align: center;">11</td> <td style="text-align: right;">\$320.00</td> </tr> </table>	M	D	Y	Amount	0	4	11	\$320.00
M	D	Y	Amount									
0	4	11	\$320.00									
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>\$300Check/\$20cash</b>								
Full Name of Contributor <b>Miklos Gaspar</b>			Registration Number, if PAC									
Street Address <b>1743 Ritchie</b>		Employer/Occupation/Labor Organization*		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px;">M</td> <td style="width: 20px;">D</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Amount</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">4</td> <td style="text-align: center;">11</td> <td style="text-align: right;">\$275.00</td> </tr> </table>	M	D	Y	Amount	0	4	11	\$275.00
M	D	Y	Amount									
0	4	11	\$275.00									
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>								

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Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

**\$0.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **\$4,535.00**



# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Ohioans for Mike Rasor							
Full Name of Contributor			Registration Number, if PAC				
Ken Gessford							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
3469 ADALINE DR				0	4	1117	\$120.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			
Full Name of Contributor			Registration Number, if PAC				
Jim Georgian							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
17929 Cinnamon Trail				0	4	1117	\$20.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Chagrin Falls		OH	44023	Cash			
Full Name of Contributor			Registration Number, if PAC				
Harley Gross							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
14300 Ridge Road				0	4	1117	\$250.00
City		State	Zip Code	Form (Cash, Check, etc.)			
North Royalton		OH	44138	Check			
Full Name of Contributor			Registration Number, if PAC				
Gary Gross							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
14300 Ridge Road				0	4	1117	\$250.00
City		State	Zip Code	Form (Cash, Check, etc.)			
North Royalton		OH	44138	Check			
Full Name of Contributor			Registration Number, if PAC				
Michael Gross							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
384 Wyoga Lake Blvd				0	4	1117	\$40.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Cuyahoga Falls		OH	44224	Cash			
Full Name of Contributor			Registration Number, if PAC				
Douglas Hartman							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
228 BOULDER BLVD				0	4	1117	\$100.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Peninsula		OH	44264	Cash			
Full Name of Contributor			Registration Number, if PAC				
Mark Hatfield							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
4194 CHEVAL CIR				0	4	1117	\$40.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			

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Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event  

\$0.00
--------

Total expenditures this event  

\$0.00
--------

Page Total \$ 820.00
----------------------

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>				
Full Name of Contributor <b>Steve Heese</b>			Registration Number, if PAC	
Street Address <b>703 TIMBERCREEK RD</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   7   \$250.00
City <b>Northfield</b>		State <b>OH</b>	Zip Code <b>44067</b>	Form (Cash, Check, etc.) <b>Check</b>
Full Name of Contributor <b>Gregory Helmick</b>			Registration Number, if PAC	
Street Address <b>2930 HASTINGS RD</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   7   \$300.00
City <b>Silver Lake</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>\$250check/\$50cash</b>
Full Name of Contributor <b>Bruce Hill</b>			Registration Number, if PAC	
Street Address <b>2991 Progress Park</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   7   \$40.00
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>\$30check/\$10cash</b>
Full Name of Contributor <b>Martin Hilovsky</b>			Registration Number, if PAC	
Street Address <b>3096 HILLSIDE TRL</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   7   \$25.00
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Paypal</b>
Full Name of Contributor <b>Michael Hoffman</b>			Registration Number, if PAC	
Street Address <b>3230 Crown Pointe</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   7   \$50.00
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>
Full Name of Contributor <b>Gregory Hullinger</b>			Registration Number, if PAC	
Street Address <b>149 Portage Trail</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   7   \$25.00
City <b>Cuyahoga Falls</b>		State <b>OH</b>	Zip Code <b>44221</b>	Form (Cash, Check, etc.) <b>Cash</b>
Full Name of Contributor <b>Fred Jabbour</b>			Registration Number, if PAC	
Street Address <b>5387 WILSHIRE PARK DR</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   7   \$100.00
City <b>Hudson</b>		State <b>OH</b>	Zip Code <b>44236</b>	Form (Cash, Check, etc.) <b>Check</b>

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Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event  
**\$0.00**

Total expenditures this event.  
**\$0.00**

Page Total \$ **\$790.00**

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>					
Full Name of Contributor <b>Nolan James</b>				Registration Number, if PAC	
Street Address <b>16651 Selby Cir.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$100.00</b>
City <b>Strongsville</b>		State <b>OH</b>	Zip Code <b>44136</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Ron Johnson</b>				Registration Number, if PAC	
Street Address <b>1250 Professor Road</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$100.00</b>
City <b>South Euclid</b>		State <b>OH</b>	Zip Code <b>44124</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>David Johnson</b>				Registration Number, if PAC	
Street Address <b>2288 Norman</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$25.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>David Joyce</b>				Registration Number, if PAC	
Street Address <b>9652 Music St.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$100.00</b>
City <b>Novelty</b>		State <b>OH</b>	Zip Code <b>44072</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Jack Juron</b>				Registration Number, if PAC	
Street Address <b>3458 TORREY PINES DR</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$20.00</b>
City <b>Fairlawn</b>		State <b>OH</b>	Zip Code <b>44333</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Alex Keleman</b>				Registration Number, if PAC	
Street Address <b>6101 Stow Road</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$10.00</b>
City <b>Hudson</b>		State <b>OH</b>	Zip Code <b>44236</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Paul Keller</b>				Registration Number, if PAC	
Street Address <b>3456 Churchill Downs</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$100.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

**\$0.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **455.00**

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>				
Full Name of Contributor <b>Ron Koehler</b>			Registration Number, if PAC	
Street Address <b>8900 STARLIGHT DR</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   1   7   \$50.00
City <b>Macedonia</b>		State <b>OH</b>	Zip Code <b>44056</b>	Form (Cash, Check, etc.) <b>Check</b>
Full Name of Contributor <b>Roy Krall</b>			Registration Number, if PAC	
Street Address <b>6699 Gates Mills Blvd</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   1   7   \$20.00
City <b>Gates Mills</b>		State <b>OH</b>	Zip Code <b>44040</b>	Form (Cash, Check, etc.) <b>Check</b>
Full Name of Contributor <b>Robert Kubick</b>			Registration Number, if PAC	
Street Address <b>4843 SHINING WILLOW BLVD</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   1   7   \$50.00
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>
Full Name of Contributor <b>Abigail Kujawski</b>			Registration Number, if PAC	
Street Address <b>317 Shadow Creek Dr</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   1   7   \$150.00
City <b>Cuyahoga Falls</b>		State <b>OH</b>	Zip Code <b>44223</b>	Form (Cash, Check, etc.) <b>\$100Paypal/\$50cash</b>
Full Name of Contributor <b>Paul Laczó</b>			Registration Number, if PAC	
Street Address <b>3361 CRESTWOOD CIR</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   1   7   \$50.00
City <b>Cuyahoga Falls</b>		State <b>OH</b>	Zip Code <b>44223</b>	Form (Cash, Check, etc.) <b>Cash</b>
Full Name of Contributor <b>Greg Lambach</b>			Registration Number, if PAC	
Street Address <b>3503 Edgewood</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   1   7   \$20.00
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>
Full Name of Contributor <b>Roger Lash</b>			Registration Number, if PAC	
Street Address <b>2155 Marhofer</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount 0   4   1   1   1   7   \$50.00
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

**\$0.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **\$390.00**

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full					
Ohioans for Mike Rasor					
Full Name of Contributor Stuart Laven				Registration Number, if PAC	
Street Address 8970 Riverwood Way		Employer/Occupation/Labor Organization*		M   D   Y	Amount
				0   4   1   1   1   7	\$100.00
City Kirtland		State OH	Zip Code 44094	Form (Cash, Check, etc.) Paypal	
Full Name of Contributor David Licate					
Street Address 2946 CROWN POINTE DR				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M   D   Y	Amount		
		0   4   1   1   1   7	\$30.00		
City Stow		State OH	Zip Code 44224	Form (Cash, Check, etc.) Check	
Full Name of Contributor Yao Liu					
Street Address 2525 Kemper Road Apt. 502				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M   D   Y	Amount		
		0   4   1   1   1   7	\$20.00		
City Shaker Heights		State OH	Zip Code 44120	Form (Cash, Check, etc.) Check	
Full Name of Contributor Jennifer Loan					
Street Address 17309 Dartmouth Ave.				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M   D   Y	Amount		
		0   4   1   1   1   7	\$50.00		
City Cleveland		State OH	Zip Code 44111	Form (Cash, Check, etc.) Paypal	
Full Name of Contributor Jeff Longstreth					
Street Address 2248 Buckley Road				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M   D   Y	Amount		
		0   4   1   1   1   7	\$20.00		
City Upper Arlington		State OH	Zip Code 43220	Form (Cash, Check, etc.) Cash	
Full Name of Contributor Pablo Lopez					
Street Address 3201 West 84th Street				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M   D   Y	Amount		
		0   4   1   1   1   7	\$75.00		
City Cleveland		State OH	Zip Code 44102	Form (Cash, Check, etc.) Paypal	
Full Name of Contributor Brian Lowdermilk					
Street Address 2536 Samira				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M   D   Y	Amount		
		0   4   1   1   1   7	\$20.00		
City Stow		State OH	Zip Code 44224	Form (Cash, Check, etc.) Check	

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Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event  

\$0.00
--------

Total expenditures this event.  

\$0.00
--------

Page Total \$ \$315.00

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Ohioans for Mike Rasor			
Full Name of Contributor		Registration Number, if PAC	
Martin Lyman			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
302 CROWN RIDGE DR		0   4   1   1   1   7	\$120.00
City	State	Zip Code	Form (Cash, Check, etc.)
Cuyahoga Falls	OH	44223	\$100check/\$20cash
Full Name of Contributor		Registration Number, if PAC	
John MacFarland			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
6893 Chaffee Court		0   4   1   1   1   7	\$50.00
City	State	Zip Code	Form (Cash, Check, etc.)
Brecksville	OH	44141	Paypal
Full Name of Contributor		Registration Number, if PAC	
Nick Marazza			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
3733 Tamarisk Drive		0   4   1   1   1   7	\$50.00
City	State	Zip Code	Form (Cash, Check, etc.)
Fairlawn	OH	44333	Paypal
Full Name of Contributor		Registration Number, if PAC	
Nancy Marhofer			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
226 Cackler Road		0   4   1   1   1   7	\$500.00
City	State	Zip Code	Form (Cash, Check, etc.)
Streetsboro	OH	44241	Check
Full Name of Contributor		Registration Number, if PAC	
Scott Marhofer			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
2699 Walnut Ridge Rd.		0   4   1   1   1   7	\$1,000.00
City	State	Zip Code	Form (Cash, Check, etc.)
Akron	OH	44333	Check
Full Name of Contributor		Registration Number, if PAC	
Hal Maxfield			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
17219 Falmouth Drive		0   4   1   1   1   7	\$250.00
City	State	Zip Code	Form (Cash, Check, etc.)
Strongsville	OH	44136	Check
Full Name of Contributor		Registration Number, if PAC	
Daniel Mazzola			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
4295 ELLSWORTH RD		0   4   1   1   1   7	\$50.00
City	State	Zip Code	Form (Cash, Check, etc.)
Stow	OH	44224	Check

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Fill in the boxes below only on the last page for this event.  
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ **\$2,020.00**

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>					
Full Name of Contributor <b>Bruce McBrian</b>				Registration Number, if PAC	
Street Address <b>4634 Young Road</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$20.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Daniel McCoy</b>				Registration Number, if PAC	
Street Address <b>3321 CHURCHILL DOWNS</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$20.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Thompson McKinney</b>				Registration Number, if PAC	
Street Address <b>4731 HILARY CIR</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$35.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>\$25check/\$10cash</b>	
Full Name of Contributor <b>Brian McNicholas</b>				Registration Number, if PAC	
Street Address <b>220 BOULDER BLVD</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$110.00</b>
City <b>Peninsula</b>		State <b>OH</b>	Zip Code <b>44264</b>	Form (Cash, Check, etc.) <b>\$100check/\$10cash</b>	
Full Name of Contributor <b>Alfred Miano</b>				Registration Number, if PAC	
Street Address <b>3029 SILVERVIEW DR</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$50.00</b>
City <b>Silver Lake</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Pete Mihelick</b>				Registration Number, if PAC	
Street Address <b>2292 LYNNWOOD DR</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$40.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Adam Miller</b>				Registration Number, if PAC	
Street Address <b>100 ALAMEDA AVE</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$50.00</b>
City <b>Cuyahoga Falls</b>		State <b>OH</b>	Zip Code <b>44221</b>	Form (Cash, Check, etc.) <b>Check</b>	

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

**\$0.00**

Total expenditures this event

**\$0.00**

Page Total \$ **\$325.00**

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Ohioans for Mike Rasor							
Full Name of Contributor				Registration Number, if PAC			
Brian Mossor							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
4537 BERRY HILL				0	4	1117	\$40.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Cash			
Full Name of Contributor				Registration Number, if PAC			
Mary Mumper							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
4242 Hile				0	4	1117	\$25.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			
Full Name of Contributor				Registration Number, if PAC			
Noah Munyer							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
2276 BLANFORD DR				0	4	1117	\$500.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			
Full Name of Contributor				Registration Number, if PAC			
Alan Narvy							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
4436 Hickory Trail				0	4	1117	\$15.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			
Full Name of Contributor				Registration Number, if PAC			
Vincent Naska							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
7336 LASCALA DR				0	4	1117	\$1,000.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Hudson		OH	44236	Check			
Full Name of Contributor				Registration Number, if PAC			
Jon Naylor							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
242 Pinehurst Rd				0	4	1117	\$20.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Munroe Falls		OH	44262	Cash			
Full Name of Contributor				Registration Number, if PAC			
Greg O'Brien							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
21127 Avalon Drive				0	4	1117	\$100.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Rocky River		OH	44116	Check			

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Fill in the boxes below only on the last page for this event.

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Total contributions this event

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 1,700.00



## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full				
Ohioans for Mike Rasor				
Full Name of Contributor			Registration Number, if PAC	
Phil Okonek				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
4640 Young			0   4   1   1   1   7	\$250.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Cash	
Full Name of Contributor			Registration Number, if PAC	
Pat O'Neill				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
143 Castle Blvd			0   4   1   1   1   7	\$70.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Akron	OH	44313	\$50check/\$20cash	
Full Name of Contributor			Registration Number, if PAC	
Darryl Piglia				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
1106 W STEELS CORNERS RD			0   4   1   1   1   7	\$10.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Cuyahoga Falls	OH	44223	Cash	
Full Name of Contributor			Registration Number, if PAC	
Stephen Pigott				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
1868 Dunellon Drive			0   4   1   1   1   7	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Lyndhurst	OH	44124	Check	
Full Name of Contributor			Registration Number, if PAC	
John Prusa				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
2627 PROGRESS PARK DR			0   4   1   1   1   7	\$250.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Check	
Full Name of Contributor			Registration Number, if PAC	
Gregg Rasor				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
856 Adam Run Drive			0   4   1   1   1   7	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Cuyahoga Falls	OH	44223	Check	
Full Name of Contributor			Registration Number, if PAC	
Nathan Rasor				
Street Address	Employer/Occupation/Labor Organization*		M   D   Y	Amount
3466 Churchill Downs			0   4   1   1   1   7	\$20.00
City	State	Zip Code	Form (Cash, Check, etc.)	
Stow	OH	44224	Cash	

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Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event  

\$0.00
--------

Total expenditures this event  

\$0.00
--------

Page Total \$ \$800.00

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>					
Full Name of Contributor <b>Robert Rasor</b>				Registration Number, if PAC	
Street Address <b>3466 Churchill Downs</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$1,050.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>\$1,000check/\$50cash</b>	
Full Name of Contributor <b>Timothy Reiheld</b>				Registration Number, if PAC	
Street Address <b>2859 Graham, #12</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$20.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Joseph Rich</b>				Registration Number, if PAC	
Street Address <b>1738 MOHICAN RD</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$50.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Gloria Rodgers</b>				Registration Number, if PAC	
Street Address <b>4562 Newcomer</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$40.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Bernard Scheidler</b>				Registration Number, if PAC	
Street Address <b>3705 BUCKWORTH CT</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$25.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Andrew Simonovski</b>				Registration Number, if PAC	
Street Address <b>450 Saint Leger St.</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$50.00</b>
City <b>Munroe Falls</b>		State <b>OH</b>	Zip Code <b>44262</b>	Form (Cash, Check, etc.) <b>Paypal</b>	
Full Name of Contributor <b>Puneet Singh</b>				Registration Number, if PAC	
Street Address <b>3105 PREAKNESS DR</b>		Employer/Occupation/Labor Organization*		M   D   Y 0   4   1   1   1   7	Amount <b>\$100.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>	

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Total contributions this event

**\$0.00**

Total expenditures this event

**\$0.00**

Page Total \$ **\$1,335.00**

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Ohioans for Mike Rasor							
Full Name of Contributor				Registration Number, if PAC			
NL Skinner Home Improvements LLC - Trent Skinner							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
6851 Kennedy Lane				0	4	1117	\$100.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Cincinnati		OH	45042	Check			
Full Name of Contributor				Registration Number, if PAC			
Peter Skurkiss							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1996 Gulls Cove				0	4	1117	\$25.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			
Full Name of Contributor				Registration Number, if PAC			
Lindsey Smith							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
31100 Manchester Lane				0	4	1117	\$100.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Bay Village		OH	44140	Check			
Full Name of Contributor				Registration Number, if PAC			
Adam Smith							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
32800 Rebecca Lane				0	4	1117	\$50.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Avon Lake		OH	44012	Check			
Full Name of Contributor				Registration Number, if PAC			
Kenneth Spahr							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
3700 Buckworth				0	4	1117	\$25.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			
Full Name of Contributor				Registration Number, if PAC			
Brett Steiger							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
157 Mulberry Lane				0	4	1117	\$40.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Munroe Falls		OH	44262	Cash			
Full Name of Contributor				Registration Number, if PAC			
Andrew Strigle							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
980 S CHINABERRY CIR				0	4	1117	\$250.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Macedonia		OH	44056	Paypal			

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Total contributions this event

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 590.00

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Ohioans for Mike Rasor							
Full Name of Contributor				Registration Number, if PAC			
Jon Sues							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
2550 Turf Paradise				0	4	1117	\$25.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			
Full Name of Contributor				Registration Number, if PAC			
Michael Teutsch							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
5840 NICHOLSON DR				0	4	1117	\$250.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Hudson		OH	44236	Check			
Full Name of Contributor				Registration Number, if PAC			
Lindsey Smith							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
31100 Manchester Lane				0	4	1117	\$100.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Bay Village		OH	44140	Check			
Full Name of Contributor				Registration Number, if PAC			
Donald Thomson							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
3751 Iona Ave.				0	4	1117	\$25.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Stow		OH	44224	Check			
Full Name of Contributor				Registration Number, if PAC			
Jason Tomci							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
817 Delaware				0	4	1117	\$40.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Akron		OH	44303	Cash			
Full Name of Contributor				Registration Number, if PAC			
Adam Trent							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
135 QUARTZ AVE				0	4	1117	\$25.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Peninsula		OH	44264	Paypal			
Full Name of Contributor				Registration Number, if PAC			
Carl Trownson							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
8350 State Route 14				0	4	1117	\$250.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Streetsboro		OH	44241	Check			

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 715.00

## Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Ohioans for Mike Rasor			
Full Name of Contributor		Registration Number, if PAC	
Chad Trownson			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
805 Holborn Rd.		0   4   1   1   1   7	\$50.00
City	State	Zip Code	Form (Cash, Check, etc.)
Streetsboro	OH	44241	Check
Full Name of Contributor		Registration Number, if PAC	
Mark Trubiano			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
8772 Pheasant Lane		0   4   1   1   1   7	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Kirtland	OH	44094	Paypal
Full Name of Contributor		Registration Number, if PAC	
Timothy Warner			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
2703 W. Avalon Drive		0   4   1   1   1   7	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Westlake	OH	44145	Check
Full Name of Contributor		Registration Number, if PAC	
Eric Weiss			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
1692 W. Ash Dr.		0   4   1   1   1   7	\$25.00
City	State	Zip Code	Form (Cash, Check, etc.)
Avon	OH	44011	Check
Full Name of Contributor		Registration Number, if PAC	
Jason Whitacre			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
4917 PEBBLEHURST DR		0   4   1   1   1   7	\$30.00
City	State	Zip Code	Form (Cash, Check, etc.)
Stow	OH	44224	Paypal
Full Name of Contributor		Registration Number, if PAC	
Bain Enterprises LLC - Craig Wilhoit			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
4650 Allen Road		0   4   1   1   1   7	\$290.00
City	State	Zip Code	Form (Cash, Check, etc.)
Stow	OH	44224	Check
Full Name of Contributor		Registration Number, if PAC	
John Wymierski			
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
3993 BAUMBERGER RD		0   4   1   1   1   7	\$20.00
City	State	Zip Code	Form (Cash, Check, etc.)
Stow	OH	44224	Cash

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Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event  

\$0.00
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Total expenditures this event.  

\$0.00
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Page Total \$ 615.00
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# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Ohioans for Mike Rasor</b>				
Full Name of Contributor <b>Amber Zibritosky</b>			Registration Number, if PAC	
Street Address <b>2203 Crockett</b>		Employer/Occupation/Labor Organization*		M   D   Y   Amount <b>0   4   1   1   7   \$25.00</b>
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Form (Cash, Check, etc.) <b>Check</b>
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M   D   Y   Amount
City		State <b>OH</b>	Zip Code	Form (Cash, Check, etc.)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M   D   Y   Amount
City		State <b>OH</b>	Zip Code	Form (Cash, Check, etc.)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M   D   Y   Amount
City		State <b>OH</b>	Zip Code	Form (Cash, Check, etc.)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M   D   Y   Amount
City		State <b>OH</b>	Zip Code	Form (Cash, Check, etc.)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M   D   Y   Amount
City		State <b>OH</b>	Zip Code	Form (Cash, Check, etc.)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M   D   Y   Amount
City		State <b>OH</b>	Zip Code	Form (Cash, Check, etc.)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M   D   Y   Amount
City		State <b>OH</b>	Zip Code	Form (Cash, Check, etc.)

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Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event  
**\$0.00**

Total expenditures this event.  
**\$0.00**

Page Total \$ **\$25.00**

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full													
Ohioans for Mike Rasor													
To Whom Paid							M	D	Y	Amount			
Expenses from Fundraising event							0	4	1	1	1	7	\$2,492.16
Address				Purpose									
N/A				From event on 4/11/17									
City		State		Zip Code		Check Number							
N/A		OH				Various							
To Whom Paid							M	D	Y	Amount			
Right to Life of Northeast Ohio							0	4	1	4	1	7	\$300.00
Address				Purpose									
572 West Market St., Suite 2				Sponsorship									
City		State		Zip Code		Check Number							
Akron		OH		44303		221							
To Whom Paid							M	D	Y	Amount			
Right to Life of Northeast Ohio							0	6	2	7	1	7	\$250.00
Address				Purpose									
572 West Market St., Suite 2				Sponsorship									
City		State		Zip Code		Check Number							
Akron		OH		44303		296							
To Whom Paid							M	D	Y	Amount			
Costco							0	7	0	3	1	7	\$163.85
Address				Purpose									
6720 Bass Pro Dr.				Candy and water for parade									
City		State		Zip Code		Check Number							
Boston Heights		OH		44236		Debit card							
To Whom Paid							M	D	Y	Amount			
Ohio Ethics Commission							0	1	0	5	1	7	\$35.00
Address				Purpose									
30 W. Spring				Annual financial disclosure fee									
City		State		Zip Code		Check Number							
Columbus		OH		43215		Debit card							
To Whom Paid							M	D	Y	Amount			
Kiel Fleming							0	6	2	8	1	7	\$1,000.00
Address				Purpose									
3989 Baumberger				Web development and graphic design									
City		State		Zip Code		Check Number							
Stow		OH		44224		223							
To Whom Paid							M	D	Y	Amount			
Michael Rasor							0	7	2	7	1	7	\$21.90
Address				Purpose									
4312 Eagle				Reimbursements for sachels									
City		State		Zip Code		Check Number							
Stow		OH		44224		298							
To Whom Paid							M	D	Y	Amount			
Summit County Board of Elections							0	6	0	9	1	7	\$20.00
Address				Purpose									
470 Grant Street				Part of petition filing fee									
City		State		Zip Code		Check Number							
Akron		OH		44311		271							

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full										
Ohioans for Mike Rasor										
To Whom Paid							M	D	Y	Amount
Facebook							0	2	1717	\$2.40
Address				Purpose						
1 Hacker Way				Advertising						
City			State	Zip Code		Check Number				
Menlo Park			CA	94025		Debit card				
To Whom Paid							M	D	Y	Amount
Facebook							0	2	2817	\$5.35
Address				Purpose						
1 Hacker Way				Advertising						
City			State	Zip Code		Check Number				
Menlo Park			ca	94025		Debit card				
To Whom Paid							M	D	Y	Amount
Facebook							0	6	3017	\$112.16
Address				Purpose						
1 Hacker Way				Advertising						
City			State	Zip Code		Check Number				
Menlo Park			CA	94025		Debit card				
To Whom Paid							M	D	Y	Amount
Facebook							0	3	3117	\$150.13
Address				Purpose						
1 Hacker Way				Advertising						
City			State	Zip Code		Check Number				
Menlo Park			CA	94025		Debit card				
To Whom Paid							M	D	Y	Amount
Facebook							0	4	3017	\$156.93
Address				Purpose						
1 Hacker Way				Advertising						
City			State	Zip Code		Check Number				
Menlo Park			CA	94025		Debit card				
To Whom Paid							M	D	Y	Amount
Facebook							0	2	2817	\$178.35
Address				Purpose						
1 Hacker Way				Advertising						
City			State	Zip Code		Check Number				
Menlo Park			CA	94025		Debit card				
To Whom Paid							M	D	Y	Amount
Summit County Republican Golf PAC							0	5	1517	\$500.00
Address				Purpose						
1755 Merriman Rd #250				Event sponsorship						
City			State	Zip Code		Check Number				
Akron			OH	44313		222				
To Whom Paid							M	D	Y	Amount
Summit County Board of Elections							0	6	0917	\$25.00
Address				Purpose						
470 Grant Street				Part of petition filing fee						
City			State	Zip Code		Check Number				
Akron			OH	44311		272				



# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full													
Ohioans for Mike Rasor													
To Whom Paid							M	D	Y	Amount			
Facebook							0	5	3	1	1	7	\$202.95
Address				Purpose									
1 Hacker Way				Advertising									
City			State	Zip Code		Check Number							
Menlo Park			CA	94025		Debit card							
To Whom Paid							M	D	Y	Amount			
Facebook							0	1	3	1	1	7	\$229.03
Address				Purpose									
1 Hacker Way				Advertising									
City			State	Zip Code		Check Number							
Menlo Park			ca	94025		Debit card							
To Whom Paid							M	D	Y	Amount			
Facebook							0	1	2	3	1	7	\$250.07
Address				Purpose									
1 Hacker Way				Advertising									
City			State	Zip Code		Check Number							
Menlo Park			CA	94025		Debit card							
To Whom Paid							M	D	Y	Amount			
Facebook							0	2	1	7	1	7	\$497.61
Address				Purpose									
1 Hacker Way				Advertising									
City			State	Zip Code		Check Number							
Menlo Park			CA	94025		Debit card							
To Whom Paid							M	D	Y	Amount			
Key Bank							0	2	2	8	1	7	\$5.00
Address				Purpose									
3857 Darrow Rd				Bank fee									
City			State	Zip Code		Check Number							
Stow			OH	44224		Electronic							
To Whom Paid							M	D	Y	Amount			
Key Bank							0	3	1	5	1	7	\$30.27
Address				Purpose									
3857 Darrow Rd				Check purchase									
City			State	Zip Code		Check Number							
Stow			OH	44224		Electronic							
To Whom Paid							M	D	Y	Amount			
Key Bank							0	4	2	8	1	7	\$5.60
Address				Purpose									
3857 Darrow Rd				Bank fee									
City			State	Zip Code		Check Number							
Stow			OH	44224		Electronic							
To Whom Paid							M	D	Y	Amount			
Address				Purpose									
City			State	Zip Code		Check Number							

## Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Ohioans for Mike Rasor</b>							
To Whom Paid <b>Allison James</b>				M	D	Y	Amount
				0	4	1	1
				1	1	1	7
							\$76.00
Address <b>16651 Selby Cir.</b>		Purpose <b>Cupcakes for event</b>					
City <b>Strongsville</b>		State <b>OH</b>	Zip Code <b>44136</b>	Check Number <b>246</b>			
To Whom Paid <b>Panini's</b>				M	D	Y	Amount
				0	4	1	1
				1	1	1	7
							\$1,400.66
Address <b>4200 Steels Pointe Drive</b>		Purpose <b>Food and beverage at event</b>					
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Check Number <b>248</b>			
To Whom Paid <b>US Post Office</b>				M	D	Y	Amount
				0	3	1	4
				1	4	1	7
							\$147.00
Address <b>3900 Darrow</b>		Purpose <b>Stamps</b>					
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Check Number <b>Debit card</b>			
To Whom Paid <b>Michael Rasor</b>				M	D	Y	Amount
				0	7	2	7
				1	7	1	7
							\$713.40
Address <b>4312 Eagle Ave</b>		Purpose <b>Reimbursement for stamps, event supplies, giveaways</b>					
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Check Number <b>297</b>			
To Whom Paid <b>Paypal</b>				M	D	Y	Amount
							\$57.57
Address <b>PO Box 45950</b>		Purpose <b>Fees for processing donations over various dates (see invoice for dates)</b>					
City <b>Omaha</b>		State <b>NB</b>	Zip Code <b>68145</b>	Check Number <b>Electronic</b>			
To Whom Paid <b>RSVP</b>				M	D	Y	Amount
				0	4	1	8
				1	8	1	7
							\$21.75
Address <b>4431 Kent Road</b>		Purpose <b>Decorations for event</b>					
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Check Number <b>Debit card</b>			
To Whom Paid <b>Wal-Mart</b>				M	D	Y	Amount
				0	4	1	4
				1	4	1	7
							\$19.15
Address <b>3520 Hudson Drive</b>		Purpose <b>Thank-you cards</b>					
City <b>Stow</b>		State <b>OH</b>	Zip Code <b>44224</b>	Check Number <b>Debit card</b>			

Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

<b>\$2,435.53</b> Page Total \$
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## Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Ohioans for Mike Rasor</b>							
To Whom Paid <b>Office Depot</b>				M	D	Y	Amount
				0	3	1	\$56.63
Address <b>37 N. Cleveland-Massillon Rd.</b>		Purpose <b>Labels and name badges</b>					
City <b>Akron</b>		State <b>OH</b>	Zip Code <b>44333</b>		Check Number <b>Debit card</b>		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State <b>OH</b>	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State <b>OH</b>	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State <b>OH</b>	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State <b>OH</b>	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State <b>OH</b>	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State <b>OH</b>	Zip Code		Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State <b>OH</b>	Zip Code		Check Number		

Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

<b>\$56.63</b>
Page Total \$ _____