

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee Al Schrader Committee						Registration Number, if PAC		
Full Name of Candidate Al Schrader								
Street Address 3344 Brunk Rd.				Office Sought Summit County Council-At-Large			District At-Large	
City Akron						State OH	Zip Code 44312	
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		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 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	\$	\$1,158.09
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)	\$	\$1,158.09
5. Total monetary expenditures (From Form No. 31-B)	\$	\$0.00
6. Balance on hand (line 4 minus line 5)	\$	\$1,158.09
7. Value of in-kind contributions received (From Form No. 31-I-1)	\$	\$0.00
8. Value of in-kind contributions made (From Form No. 31-I-2)	\$	\$0.00
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	\$39,629.59
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	\$0.00
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	\$11.00
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

#1055
2017 JUL 27 PM 12:49
AKRON, OHIO

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

Al Schrader, Deputy Treasurer

Al Schrader

7-20-17

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

Contribution pages _____

Expenditure pages _____

Other pages _____

Total pages 0

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee Al Schrader Committee													
From Whom Received Al Schrader										Prior Amount \$39,629.59		Amt. Incurred this Period \$0.00	
Address 3344 Brunk Rd.												Outstanding Balance \$39,629.59	
City Akron		State OH		Zip Code 44312		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 3		0	4	9 2									
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			
		OH				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			
		OH				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			
		OH				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 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)]

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 \$ \$39,629.59
- ² Total received this period \$ \$0.00 (To Form No. 31-A-2)
- ³ Total payments this period \$ \$0.00 (To Form No. 31-B)
- ⁴ Total Outstanding Balance \$ \$39,629.59 (To Form No. 30-A)

Statement of Loans Made

Prescribed by Secretary of State 2/01

Full Name of Committee Al Schrader Committee									
To Whom Made Al Schrader Committee						Prior Amount \$11.00		Amt. Loaned this Period \$0.00	
Address 3344 Brunk Rd.								Outstanding Balance \$11.00	
City Akron			State OH	Zip Code 44312		Payments Received This Period			
						Date		Amount	
Date Loan was Originally Made						M	D	Y	\$
						M	D	Y	
						M	D	Y	
To Whom Made						Prior Amount		Amt. Loaned this Period	
Address								Outstanding Balance	
City			State OH	Zip Code		Payments Received This Period			
						Date		Amount	
Date Loan was Originally Made						M	D	Y	\$
						M	D	Y	
						M	D	Y	
To Whom Made						Prior Amount		Amt. Loaned this Period	
Address								Outstanding Balance	
City			State OH	Zip Code		Payments Received This Period			
						Date		Amount	
Date Loan was Originally Made						M	D	Y	\$
						M	D	Y	
						M	D	Y	

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

Total Loans this Period \$ 0.00 (also record on Form 31-B)

Total Outstanding Balance \$ 11.00 (also record on cover page)

Total Payments Received this Period \$ 0.00 (also record on Forms 31-A-2)