

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee Friends of Drew Reilly							Registration Number, if PAC					
Full Name of Candidate Drew C. Reilly												
Street Address 816 Davis Ave					Office Sought Council			District Ward 1				
City Cuyahoga Falls						State OH	Zip Code 44221					
Type of Report (place X to the left of report type)	<input checked="" 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 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			0	9	1	2	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 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	\$	\$0.00
2. Total monetary contributions (From Form No. 31-A)	\$	\$1,000.00
3. Total other income (From Form No. 31-A-2)	\$	\$0.00
4. Total funds available (sum of lines 1, 2, 3)	\$	\$1,000.00
5. Total monetary expenditures (From Form No. 31-B)	\$	\$0.00
6. Balance on hand (line 4 minus line 5)	\$	\$1,000.00
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	\$2,108.46
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)	\$	\$762.50
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.

Drew C. Reilly - Deputy Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

[Handwritten Signature]
Signature

08/31/17
[Handwritten Date]
Date

Contribution pages 2

Expenditure pages 0

Other pages 1

Total pages 3

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Drew Reilly							
Full Name of Contributor Alisha Brinson						Registration Number, if PAC	
Street Address 292 Greensfield			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Copley		State OH	Zip Code 44321	M 0	D 8	Y 1 7	Amount \$25.00
Full Name of Contributor Evis Brinson						Registration Number, if PAC	
Street Address 292 Greensfield			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Copley		State OH	Zip Code 44321	M 0	D 8	Y 1 7	Amount \$25.00
Full Name of Contributor Cuyhaoga Falls Democratic Club						Registration Number, if PAC	
Street Address 2467 23rd St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Cuyahoga Falls		State OH	Zip Code 44223	M 0	D 7	Y 2 2 1 7	Amount \$500.00
Full Name of Contributor Friends of Greta Johnson						Registration Number, if PAC	
Street Address 2220 Cambridge Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Akron		State OH	Zip Code 44319	M 0	D 8	Y 2 1 1 7	Amount \$250.00
Full Name of Contributor Dawna Skapin						Registration Number, if PAC	
Street Address 3566 Dayton St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Kent		State OH	Zip Code 44240	M 0	D 8	Y 2 1 1 7	Amount \$200.00
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State OH	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 OH	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 OH	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)]

In-Kind Contributions Received

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Name of Committee in Full Friends of Drew Reilly				
Full Name of Contributor The Committee to Elect Don Walters		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 3395 Pendleton Ave		Description of Item or Service Flyer Copies		M D Y Fair Market Value 0 8 1 8 1 7 \$258.46
City Cuyahoga Falls		State OH	Zip Code 44221	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
Full Name of Contributor The Committee to Elect Don Walters		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 3395 Pendleton Ave		Description of Item or Service Literature Production and Printing		M D Y Fair Market Value 0 8 1 8 1 7 \$1,350.00
City Cuyahoga Falls		State OH	Zip Code 44221	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
Full Name of Contributor Kelsey Kulesza		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 1653 Bendelow Dr		Description of Item or Service Logo and Sign Design		M D Y Fair Market Value 0 8 1 8 1 7 \$500.00
City Columbus		State OH	Zip Code 43228	Received at Fundraising Event? <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 OH	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 OH	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 OH	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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO

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