

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee FRIENDS OF Vic Pallotta						Registration Number, if PAC		
Full Name of Candidate VICTOR L. Pallotta								
Street Address 407 Marian LK Blvd					Office Sought CF.O Council		Ward 3	District
City CUYAHOGA FALLS						State OH	Zip Code 44223	
Type of Report (place X to the left of report type)	Pre-Primary	Post-Primary	X	Pre-General	Post-General	Annual Year		
	July Monthly	August Monthly	September Monthly	Termination	Semiannual			
Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date of Election		M 10	D 23	Y 17

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
2. Total monetary contributions (From Form No. 31-A)	\$	2845 -
3. Total other income (From Form No. 31-A-2)	\$	100 -
4. Total funds available (sum of lines 1, 2, 3)	\$	2945.00
5. Total monetary expenditures (From Form No. 31-B)	\$	2419.80
6. Balance on hand (line 4 minus line 5)	\$	525.20
7. Value of in-kind contributions received (From Form No. 31-D)	\$	363.75
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	100 -
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	
12. Value of independent expenditures made (From Form No. 31-U)	\$	
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$	

**OFFICIAL COPY
SUMMIT COUNTY
BOARD OF ELECTIONS**

2017 OCT 23 AM 9:46

AKRON OHIO

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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.

Daphne J Sturkey, Treasurer
Print Name and Title (Treasurer and Deputy Treasurer only)

Daphne Sturkey
Signature

10/23/2017
~~00:00:0000~~
Date

Contribution pages **1**

Expenditure pages **1**

Other pages **3**

Total pages **5**

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full FRIENDS OF VIC PALLOTTA							
Full Name of Contributor Karen E. Nelsch						Registration Number, if PAC	
Street Address 2545 N. Haven			Employer Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) 8832 CHECK	
City CUYAHOGA FALLS		State OH		Zip Code 44223		M D Y Amount 09 09 17 100.00	
Full Name of Contributor Brenda L. RYAN						Registration Number, if PAC	
Street Address 907 Magnolia Av			Employer Occupation/Labor Organization* Hairstylist - IND.			Form (Cash, Check, etc.) ✓ 2474	
City CUYAHOGA FALLS		State OH		Zip Code 44221		M D Y Amount 09 09 17 25.00	
Full Name of Contributor Samuel C. Randazzo						Registration Number, if PAC	
Street Address 645 S. Grant Av			Employer Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) 5577	
City Columbus		State OH		Zip Code 43206		M D Y Amount 09 24 17 1000.00	
Full Name of Contributor Russell B. IONA						Registration Number, if PAC	
Street Address 675 Dominic Dr			Employer Occupation/Labor Organization* Realtor			Form (Cash, Check, etc.) # 2472	
City CUYAHOGA FALLS		State OH		Zip Code 44223-		M D Y Amount 10 02 17 120.00	
Full Name of Contributor DAVID G. Graef						Registration Number, if PAC	
Street Address 403 Marian Lake			Employer Occupation/Labor Organization* SALES MAN			Form (Cash, Check, etc.) # 4753	
City CUYAHOGA FALLS		State OH		Zip Code 44223		M D Y Amount 10 04 17 100.00	
Full Name of Contributor Summit PAC						Registration Number, if PAC 81-2493888	
Street Address 863 N. Cleveland Massillon Rd			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.) # 145	
City AKron		State OH		Zip Code 44333		M D Y Amount 09 07 17 500.00	
Full Name of Contributor The PYKE CAMPAIGN Committee						Registration Number, if PAC	
Street Address 854 Chestnut Blvd			Employer Occupation/Labor Organization* Summa / Administrator			Form (Cash, Check, etc.) # 101	
City CUYAHOGA FALLS		State OH		Zip Code 44221		M D Y Amount 10 02 17 1000.00	
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State		Zip Code		M D Y Amount	

* 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

Prescribed by Secretary of State 03/05

Name of Committee in Full: FRIENDS OF VIC PALLOTTA

Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Victor L. Palotta	407 Marian LK Blvd	Luyahoga Falls	OH	44223	retired/city council		Rigid Magnet Sign	051017	105.68		
Victor L. Palotta	407 Marian LK Blvd	Luyahoga Falls	OH	44223	retired/city council		T-SHIRTS (12)	0526117	258.07		
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>
Full Name of Contributor	Street Address	City	State	Zip Code	Employer, Occupation, Labor Organization*	Registration Number, if PAC	Description of Item or Service	Fair Market Value	Received at Fundraising Event?	YES <input type="radio"/>	NO <input checked="" type="radio"/>

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Statement of Loans Received

Prescribed by Secretary of State 3 05

Full Name of Committee		From Whom Received		Address		City		State		Zip Code		Date Loan was Originally Incurred		Registration Number, if PAC		Employer Occupation Labor Organization*		From Whom Received		Prior Amount		Outstanding Balance	
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FRIENDS OF VIC PALLotta		Victor L. Pallotta		407 Marian Lake Blvd		Cuyahoga Falls OH		OH		44323		08 19 17				Retired / CFO Council							
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