



Committee Name Magic City Democrats		Office Sought		District	
Street Address 225 Stanley Ave (p o box 221)		City Barberton	State OH	Zip 44203	
Candidate Name OR PAC Registration Number		Treasurer Name Shorter Griffin		Election Date (MM/DD/YYYY) 11/06/2017	

Type of Report (choose one):

Annual Semiannual Pre-Primary Post-Primary Pre-General Post-General

Statewide Candidates Only:

July Monthly August Monthly September Monthly

Year
2017

Amended Report

No Yes

Termination

Check this box if the committee wishes to terminate with this report

Short Form Report (R.C. 3517.10(H))

Check this box if the committee is filing a short term report. See attached instructions.


1. Amount brought forward from last report	\$2,754.02
2. Total monetary contributions (From Forms 31-A and 31-E)	\$5590.00
3. Total other income (From Form 31-A-2)	
4. Total funds available (sum of lines 1,2, and 3)	\$8344.02
5. Total monetary expenditures (From Forms 31-B and 31-F)	\$2353.97
6. Balance on hand (line 4 minus line 5)	\$5990.05
7. Value of in-kind contributions received (From Form 31-J-1)	\$0.00
8. Value of in-kind contributions made (From Form 31-J-2)	\$0.00
9. Outstanding loans owed by committee (From Form 31-C)	\$0.00
10. Outstanding debts owed by committee (From Form 31-N)	\$0.00
11. Outstanding loans owed to committee (From Form 31-K)	\$0.00
12. Value of independent expenditures made (From Form 31-U)	\$0.00

OFFICIAL COPY
SUMMIT COUNTY
BOARD OF ELECTIONS

2017 OCT 26 AM 9:24

1531 Ave

**THIS STATEMENT IS MADE UNDER PENALTY OF ELECTION FALSIFICATION.
WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.**


Signature of Treasurer or Deputy Treasurer

10/26/2017
Date (MM/DD/YYYY)

Contribution Pages
12

Expenditure Pages
2

Other Pages
1

Total Pages
15

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Magic City Democrats				Registration Number, if PAC			
Full Name of Contributor Friends of Kristen M. Scalise				Registration Number, if PAC			
Street Address 274 Harvest DR		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	8	3	\$75.00
City Akron		State OH	Zip Code 44333	Form (Cash, Check, etc.) Check			
Full Name of Contributor Alison Breaux				Registration Number, if PAC			
Street Address 675 Merriman Road		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	8	3	\$75.00
City Akron		State OH	Zip Code 44303	Form (Cash, Check, etc.) Check			
Full Name of Contributor LaSara L. Johnson				Registration Number, if PAC			
Street Address 289 Stanley Ave		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	9	0	\$25.00
City Barberton		State OH	Zip Code 44203	Form (Cash, Check, etc.) Check			
Full Name of Contributor Mary Catherine Orr				Registration Number, if PAC			
Street Address 971 Tweed DR		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	9	0	\$35.00
City Akron		State OH	Zip Code 44319	Form (Cash, Check, etc.) Check			
Full Name of Contributor The Law Office R. Tadd Pinkston LLC				Registration Number, if PAC			
Street Address 103 Fifth St Ste L		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	9	0	\$60.00
City Barberton		State OH	Zip Code 44203	Form (Cash, Check, etc.) Check			
Full Name of Contributor Federated Democratic Women of Summit County				Registration Number, if PAC			
Street Address 82 Cedar Woods Dr		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	9	0	\$275.00
City Cuyahoga Falls		State OH	Zip Code 44223	Form (Cash, Check, etc.) Check			
Full Name of Contributor Margaret Scott				Registration Number, if PAC			
Street Address 3776 Fairway Park DR Apt 101		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	9	0	\$110.00
City Copley		State OH	Zip Code 44321	Form (Cash, Check, etc.) Check			

* 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)]

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

Total expenditures this event.

\$0.00

\$0.00

Page Total \$ **\$655.00**



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

Campaign Finance | (614) 466-3111
www.OhioSecretaryofState.gov
cfinance@OhioSecretaryofState.gov

Form 31-E
R.C. 3517.10(B)

Full Name of Committee Magic City Democrats				
Full Name of Contributor Moriah Cheatham			Registration Number, if PAC	
Street Address 289 E. Baird Ave.	Employer/Occupation/Labor Organization*		Amount \$35.00	
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Leon Ricks			Registration Number, if PAC	
Street Address 118 1st St SE	Employer/Occupation/Labor Organization*		Amount \$35.00	
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Diane Street			Registration Number, if PAC	
Street Address 649 Mesa Verde Dr	Employer/Occupation/Labor Organization*		Amount \$35.00	
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Craig Megyes			Registration Number, if PAC	
Street Address 131 3rd St NW	Employer/Occupation/Labor Organization*		Amount \$35.00	
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Elliot Kclkovich			Registration Number, if PAC	
Street Address 369 Gresham Dr	Employer/Occupation/Labor Organization*		Amount 35.00	
City Fairlawn	State OH	Zip Code 44308	Form (Cash, Check, Etc) Cash	

* 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)]

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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

Total Expenditures This Event

Page Total \$ \$175.00



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

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Form 31-E
R.C. 3517.10(B)

Full Name of Committee Magic City Democrats				
Full Name of Contributor Lorraine Snowden			Registration Number, if PAC	
Street Address 130 5th ST SE		Employer/Occupation/Labor Organization*		Amount \$35.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Old is Gold Clarence Ingol II			Registration Number, if PAC	
Street Address 442 W Turkeyfoot Rd		Employer/Occupation/Labor Organization*		Amount \$25.00
City New Franklin	State OH	Zip Code 44319	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Friends of Tavia Galonski			Registration Number, if PAC	
Street Address 1137 Allendale Ave		Employer/Occupation/Labor Organization*		Amount \$375.00
City Akron	State OH	Zip Code 44306	Form (Cash, Check, Etc) Check	
Full Name of Contributor Tim S. Crawford			Registration Number, if PAC	
Street Address 4109 Cleveland Massillon Rd		Employer/Occupation/Labor Organization*		Amount \$60.00
City Norton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor West End Hardware Frank A, Wrobel			Registration Number, if PAC	
Street Address 909 Wooster Rd		Employer/Occupation/Labor Organization*		Amount \$25.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Cash	

* 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)]

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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

Total Expenditures This Event

Page Total \$ 520.00



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

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Form 31-E
R.C. 3517.10(B)

Full Name of Committee Magic City Democrats				
Full Name of Contributor Friends of William Judge			Registration Number, if PAC	
Street Address 98 29th St NW		Employer/Occupation/Labor Organization*		Amount \$375.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor All Ohio Recovery Richard Hooker			Registration Number, if PAC	
Street Address 188 Snyder Ave		Employer/Occupation/Labor Organization*		Amount \$35.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Michael E. Vinay			Registration Number, if PAC	
Street Address 1493 Wilson Way Dr.		Employer/Occupation/Labor Organization*		Amount \$130.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Shorter Griffin			Registration Number, if PAC	
Street Address 225 Stanley Ave		Employer/Occupation/Labor Organization*		Amount \$105.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Norma Jean Grigalunas			Registration Number, if PAC	
Street Address 1544 Harden Dr.		Employer/Occupation/Labor Organization*		Amount \$70.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	

* 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)]

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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

Total Expenditures This Event

Page Total \$ 715.00



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

Form 31-E
R.C. 3517.10(B)

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Full Name of Committee Magic City Democrats				
Full Name of Contributor Friends of Greta Johnson			Registration Number, if PAC	
Street Address 2220 Cambridge CT		Employer/Occupation/Labor Organization*		Amount \$70.00
City Akron	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Wilbur L. Frey			Registration Number, if PAC	
Street Address 1657 Harden Dr		Employer/Occupation/Labor Organization*		Amount \$60.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Adelina M Angeloff			Registration Number, if PAC	
Street Address 756 E Ford Ave		Employer/Occupation/Labor Organization*		Amount \$35.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Cynthia I Sutton			Registration Number, if PAC	
Street Address 338 E Baird		Employer/Occupation/Labor Organization*		Amount \$70.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Sarah A. Akers			Registration Number, if PAC	
Street Address 570 Bell Mawr Place		Employer/Occupation/Labor Organization*		Amount \$275.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	

* 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)]

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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

Total Expenditures This Event

Page Total \$ 510.00



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

Form 31-E
R.C. 3517.10(B)

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Full Name of Committee Magic City Democrats				
Full Name of Contributor Caines Flowers Caine Pieffer			Registration Number, if PAC	
Street Address 137 NW 2nd St		Employer/Occupation/Labor Organization*		Amount \$25.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Thomas A. Teodosio			Registration Number, if PAC	
Street Address 495 Belmont Park Dr		Employer/Occupation/Labor Organization*		Amount \$70.00
City Munroe Falls	State OH	Zip Code 44262	Form (Cash, Check, Etc) Check	
Full Name of Contributor Elect Ilene Shapiro			Registration Number, if PAC	
Street Address 295 Wyant Rd		Employer/Occupation/Labor Organization*		Amount \$170.00
City Akron	State OH	Zip Code 44313	Form (Cash, Check, Etc) Check	
Full Name of Contributor Robert A. McCarty			Registration Number, if PAC	
Street Address 611 Woodbrook Rd		Employer/Occupation/Labor Organization*		Amount \$35.00
City Cuyahoga Falls	State OH	Zip Code 44223	Form (Cash, Check, Etc) Check	
Full Name of Contributor Terrance D Coburn			Registration Number, if PAC	
Street Address 166 14th ST NW		Employer/Occupation/Labor Organization*		Amount \$105.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	

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Total Contributions This Event

Total Expenditures This Event

Page Total \$ ~~309.00~~ 405.00



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

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Form 31-E
R.C. 3517.10(B)

Full Name of Committee Magic City Democrats				
Full Name of Contributor AFSCME LOCAL 265 TRI CITY PUBLIC EMPLOYEES			Registration Number, if PAC LA 1273	
Street Address 527 Harvard Ave		Employer/Occupation/Labor Organization*		Amount \$ 375.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor George H Angeloff			Registration Number, if PAC	
Street Address 756 E Ford Ave		Employer/Occupation/Labor Organization*		Amount \$ 25.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Michael R Soyars			Registration Number, if PAC	
Street Address 209 E Park Ave		Employer/Occupation/Labor Organization*		Amount \$ 80.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Evelyn L. Fennell			Registration Number, if PAC	
Street Address 431 S Van Buren Ave		Employer/Occupation/Labor Organization*		Amount \$ 35.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Paul J. Suboticki			Registration Number, if PAC	
Street Address 823 N Summit St		Employer/Occupation/Labor Organization*		Amount \$ 70.00
City Barberton	State OH	Zip Code 44203	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

Total Expenditures This Event

Page Total \$ 585.00



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

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Form 31-E
R.C. 3517.10(B)

Full Name of Committee Magic City Democrats				
Full Name of Contributor Sandra S Guy			Registration Number, if PAC	
Street Address 1551 Harden Dr		Employer/Occupation/Labor Organization*		Amount \$ 70.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Bryan L. Poorman			Registration Number, if PAC	
Street Address 48 Schwinn Dr		Employer/Occupation/Labor Organization*		Amount \$ 35.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Melissa C. Dean			Registration Number, if PAC	
Street Address 3857 Heron Watch Dr		Employer/Occupation/Labor Organization*		Amount \$ 70.00
City Akron	State OH	Zip Code 44319	Form (Cash, Check, Etc) Check	
Full Name of Contributor Terry L. Avant			Registration Number, if PAC	
Street Address 1066 Belleview		Employer/Occupation/Labor Organization*		Amount \$ 70.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Alan M Canfora			Registration Number, if PAC	
Street Address 156 6th ST NW		Employer/Occupation/Labor Organization*		Amount \$ 35.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	

* 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)]

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

Total Expenditures This Event

Page Total \$ 280.00



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

Full Name of Committee Magic City Democrats				
Full Name of Contributor Carla S. Debevec			Registration Number, if PAC	
Street Address 559 West Lake Ave		Employer/Occupation/Labor Organization*		Amount \$ 70.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Friends of Kristen M. Scalise			Registration Number, if PAC	
Street Address 274 Harvest Dr		Employer/Occupation/Labor Organization*		Amount \$ 70.00
City Akron	State OH	Zip Code 44333	Form (Cash, Check, Etc) Check	
Full Name of Contributor Friends of William Judge			Registration Number, if PAC	
Street Address 98 29th St NW		Employer/Occupation/Labor Organization*		Amount \$ 1000.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Lynda J Rutherford			Registration Number, if PAC	
Street Address 39 30th ST NW Apt 102		Employer/Occupation/Labor Organization*		Amount \$35.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Sandra A Ratay			Registration Number, if PAC	
Street Address 531 Lincoln Ave		Employer/Occupation/Labor Organization*		Amount \$ 45.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	

* 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)]

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Total Contributions This Event

Total Expenditures This Event

Page Total \$ 1220.00



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

Form 31-E
R.C. 3517.10(B)

Campaign Finance | (614) 466-3111
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Full Name of Committee Magic City Democrats				
Full Name of Contributor Wilbur L. Frey Jr			Registration Number, if PAC	
Street Address 1657 Harden Dr	Employer/Occupation/Labor Organization*			Amount \$ 35.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Cynthia L. Sutton			Registration Number, if PAC	
Street Address 338 E, Baird Ave	Employer/Occupation/Labor Organization*			Amount \$ 35.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Dr. Phillip J. Portis			Registration Number, if PAC	
Street Address 456 S. Arlington St	Employer/Occupation/Labor Organization*			Amount \$ 25.00
City Akron	State OH	Zip Code 44306	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Fred Maurer			Registration Number, if PAC	
Street Address 951 S Azalea Blvd	Employer/Occupation/Labor Organization*			Amount \$ 25.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Ann Suboticki			Registration Number, if PAC	
Street Address 823 N Summit St	Employer/Occupation/Labor Organization*			Amount \$ 25.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Cash	

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Total Contributions This Event

Total Expenditures This Event

Page Total \$ 145.00



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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee Magic City Democrats				
Full Name of Contributor Elwood Palmer			Registration Number, if PAC	
Street Address 961 Mesa Verde Dr		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/21/2017
Amount \$60.00				
City Barberton		State OH	Zip Code 44203	
Form (Cash, Check, Etc) Cash				
Full Name of Contributor Margaret A. Caulk			Registration Number, if PAC	
Street Address 105 8th St NW		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10/12/2017
Amount \$35.00				
City Barberton		State OH	Zip Code 44203	
Form (Cash, Check, Etc) Check				
Full Name of Contributor IBEW PAC VOLUNTARY FUND			Registration Number, if PAC C00027342	
Street Address 900 Seventh Street, NW		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/21/2017
Amount \$100.00				
City Washington		State DC	Zip Code 20001	
Form (Cash, Check, Etc) Check				
Full Name of Contributor Bricklayers & Allied Craftsmen Local NO. 7			Registration Number, if PAC Local	
Street Address 908 1/2		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/20/2017
Amount \$70.00				
City Akron		State OH	Zip Code 44310	
Form (Cash, Check, Etc) Check				
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)
Amount				
City		State	Zip Code	
Form (Cash, Check, Etc)				

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Total Contributions This Event
\$5475.00

Total Expenditures This Event
~~4825.47~~ 1813.77

Page Total \$ 265.00



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Magic City Democrats				
Full Name of Contributor Charles W. Oldfield			Registration Number, if PAC	
Street Address 333 Kimberly Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44313	Date (MM/DD/YYYY) 07/26/2017	Amount \$115.00
Full Name of Contributor "Contributions from form No. 31-E"			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY) 09/21/2017	Amount \$5475.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	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 for Social or Fund-Raising Event

Campaign Finance | (614) 466-3111
www.OhioSecretaryofState.gov
cfinance@OhioSecretaryofState.gov

Form 31-F
R.C. 3517.10

Full Name of Committee				
Magic City Democrats				
To Whom Paid			Date (MM/DD/YYYY)	Amount
Slovene Center			09/21/2017	\$1334.00
Street Address		Purpose		
70 14th ST NW		Dinner for fund-raising Event		
City	State	Zip Code	Check Number	
Barberton	OH	44203	2282	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Carol Frye			09/21/2017	\$19.35
Street Address		Purpose		
1657 Harden Dr		Decorations		
City	State	Zip Code	Check Number	
Barberton	OH	44203	2281	
To Whom Paid			Date (MM/DD/YYYY)	Amount
KEM Printing			09/21/2017	\$229.51
Street Address		Purpose		
564 W Tusc Ave		Print Programs		
City	State	Zip Code	Check Number	
Barberton	OH	44203	2280	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Sandy Ratay			09/14/2017	\$86.61
Street Address		Purpose		
531 Lincoln Ave		Decorations		
City	State	Zip Code	Check Number	
Barberton	OH	44203	2279	
To Whom Paid			Date (MM/DD/YYYY)	Amount
Barberton Beautification			10/13/2017	\$144.50
Street Address		Purpose		
500 W Hopocan Ave		Flowers for Center pieces		
City	State	Zip Code	Check Number	
Barberton	OH	44203	2278	

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.

Page Total \$ ~~1823.27~~ 1813.97



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Magic City Democrats			
To Whom Paid " Expenditures from form 31-F"		Date (MM/DD/YYYY) 8-21-17	Amount \$1813.97
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid Summit County Democratic Party		Date (MM/DD/YYYY) 08/06/2017	Amount \$250.00
Street Address 438 Grant St		Purpose Donation	
City Akron	State OH	Zip Code 44313	Check Number 2275
To Whom Paid Green Diamond Bar & Grille		Date (MM/DD/YYYY) 08/29/2017	Amount \$25.00
Street Address 125 2nd St		Purpose Refund per Board of Election	
City Barberton	State OH	Zip Code 44203	Check Number 2276
To Whom Paid Barberton Branch NAACP		Date (MM/DD/YYYY) 10/07/2017	Amount \$150.00
Street Address 1419 Copley Rd		Purpose Donation	
City Akron	State OH	Zip Code 44320	Check Number 2283
To Whom Paid Charles W Oldfield		Date (MM/DD/YYYY) 08/06/2017	Amount \$115.00
Street Address 333 Kimberly Rd		Purpose Refund per Board of Election	
City Akron	State OH	Zip Code 44313	Check Number 2277

Page Total \$ 2353.97