




Committee Name Friends of Doug Herchick		Office Sought Stow City Council		District 2
Street Address 4197 Hampton Circle		City Stow	State OH	Zip 44224
Candidate Name OR PAC Registration Number Doug Herchick		Treasurer Name Kristine Herchick		Election Date (MM/DD/YYYY) 11/07/2017
Type of Report (choose one): <input type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Post-Primary <input type="checkbox"/> Pre-General <input checked="" type="checkbox"/> Post-General				
Statewide Candidates Only: <input type="checkbox"/> July Monthly <input type="checkbox"/> August Monthly <input type="checkbox"/> September Monthly				Year 2017
Amended Report <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Termination <input type="checkbox"/> Check this box if the committee wishes to terminate with this report		Short Form Report (R.C. 3517.10(H)) <input type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions.

1. Amount brought forward from last report	\$653.38
2. Total monetary contributions (From Forms 31-A and 31-E)	\$0.00
3. Total other income (From Form 31-A-2)	\$0.00
4. Total funds available (sum of lines 1, 2, 3)	\$653.38
5. Total monetary expenditures (From Forms 31-B and 31-F)	\$116.69
6. Balance on hand (line 4 minus line 5)	\$536.69
7. Value of in-kind contributions received (From Form 31-J-1)	\$200.00
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 DEC 11 AM 11:09
Kristine Herchick
#1724 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

12/11/2017
Date (MM/DD/YYYY)

Contribution Pages 0	Expenditure Pages 1	Other Pages 1	Total Pages 2
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Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Doug Herchick			
To Whom Paid Office Max		Date (MM/DD/YYYY) 10/22/2017	Amount \$24.96
Street Address 4220 Kent Rd		Purpose Envelope Labels	
City Stow	State OH	Zip Code 44224	Check Number Debit
To Whom Paid BJs Wholesale		Date (MM/DD/YYYY) 10/22/2017	Amount \$62.97
Street Address 1677 Home Ave		Purpose Halloween candy for door knocking	
City Akron	State OH	Zip Code 44310	Check Number Debit
To Whom Paid Drug Mart		Date (MM/DD/YYYY) 10/24/2017	Amount \$19.60
Street Address 4044 Fishcreek Rd		Purpose Postage Stamps	
City Stow	State OH	Zip Code 44224	Check Number Debit
To Whom Paid Target		Date (MM/DD/YYYY) 10/27/2017	Amount \$9.16
Street Address 2801 W. Market St		Purpose Copy paper for fliers	
City Fairlawn	State OH	Zip Code 44333	Check Number Debit
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 116.69



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee Friends of Doug Herchick			
Full Name of Contributor Summit County Republican Office		Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address 1755 Merriman Rd Ste 250	Description of Item or Service Ink for copies of fliers		Date (MM/DD/YYYY) 10/19/2017
Fair Market Value \$100.00	City Akron	State OH	Zip Code 44313
Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Full Name of Contributor Summit County Republican Office		Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address 1755 Merriman Rd Ste 250	Description of Item or Service Ink for copies of fliers		Date (MM/DD/YYYY) 10/27/2017
Fair Market Value \$100.00	City Akron	State OH	Zip Code 44313
Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Full Name of Contributor		Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service		Date (MM/DD/YYYY)
Fair Market Value	City	State	Zip Code
Received at Fundraising Event?			
Full Name of Contributor		Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service		Date (MM/DD/YYYY)
Fair Market Value	City	State	Zip Code
Received at Fundraising Event?			
Full Name of Contributor		Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service		Date (MM/DD/YYYY)
Fair Market Value	City	State	Zip Code
Received at Fundraising Event?			

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and 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)]