



Committee Name <i>Committee To Re-Elect Judge Annalisa S. Williams</i>		Office Sought <i>Municipal Court Judge</i>		District <i>Akron</i>
Street Address <i>1137 Alameda Ave</i>		City <i>Akron</i>	State <i>OH</i>	Zip <i>44306</i>
Candidate Name OR PAC Registration Number <i>Annalisa S. Williams</i>		Treasurer Name <i>John Galinski</i>		Election Date (MM/DD/YYYY) <i>11/07/17</i>
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 <i>2017</i>
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	<i>37253.97</i>
2. Total monetary contributions (From Forms 31-A and 31-E)	<i>890</i> <del>XXXXXX</del>
3. Total other income (From Form 31-A-2)	<i>28.82</i>
4. Total funds available (sum of lines 1, 2, 3)	<i>36057.74</i>
5. Total monetary expenditures (From Forms 31-B and 31-F)	
6. Balance on hand (line 4 minus line 5)	<i>2114.95</i>
7. Value of in-kind contributions received (From Form 31-J-1)	
8. Value of in-kind contributions made (From Form 31-J-2)	
9. Outstanding loans owed by committee (From Form 31-C)	<i>23597.78</i>
10. Outstanding debts owed by committee (From Form 31-N)	<del>XXXXXX</del>
11. Outstanding loans owed to committee (From Form 31-K)	
12. Value of independent expenditures made (From Form 31-U)	

2017-12-11 12:20

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OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS

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

*[Signature]*  
Signature of Treasurer or Deputy Treasurer

*12/11/17*  
Date (MM/DD/YYYY)

Contribution Pages  
*2*

Expenditure Pages  
*2*

Other Pages  
*4*

Total Pages  
*8*



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee <i>Committee To Re-Elect Judge Annalisa S. Williams</i>				
Full Name of Contributor <i>Edward Smith</i>			Registration Number, if PAC	
Street Address <i>265 S. Main St.</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Money Order</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44308</i>	Date (MM/DD/YYYY) <i>10/20/17</i>	Amount <i>115</i>
Full Name of Contributor <i>Donald Walker</i>			Registration Number, if PAC	
Street Address <i>175 Hunt Club Apt 2A</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Money Order</i>
City <i>Copley</i>	State <i>OH</i>	Zip Code <i>44321</i>	Date (MM/DD/YYYY) <i>10/20/17</i>	Amount <i>150</i>
Full Name of Contributor <i>Mary Sneed</i>			Registration Number, if PAC	
Street Address <i>653 Madison Ave</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Check</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44320</i>	Date (MM/DD/YYYY) <i>10/20/17</i>	Amount <i>25</i>
Full Name of Contributor <i>Kristen Kawalski</i>			Registration Number, if PAC	
Street Address <i>16555 Elderdale Dr.</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Middleburg Hts</i>	State <i>OH</i>	Zip Code <i>44130</i>	Date (MM/DD/YYYY) <i>10/20/17</i>	Amount <i>200</i>
Full Name of Contributor <i>Susan Van Buren</i>			Registration Number, if PAC	
Street Address <i>6818 Old Ravenna Rd. #2</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Check</i>
City <i>Brecksville</i>	State <i>OH</i>	Zip Code <i>44141</i>	Date (MM/DD/YYYY) <i>10/20/17</i>	Amount <i>100</i>

\*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 Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee <i>Comm. ree To Re-Elect Judge Annals, S. Williams</i>				
Full Name of Contributor <i>Darrell Parnell</i>			Registration Number, if PAC	
Street Address <i>823 Fair Hill Dr.</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44313</i>	Date (MM/DD/YYYY) <i>10/25/17</i>	Amount <i>100</i>
Full Name of Contributor <i>Johnette Curry</i>			Registration Number, if PAC	
Street Address <i>2390 Killian Rd</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44312</i>	Date (MM/DD/YYYY) <i>11/28/17</i>	Amount <i>100</i>
Full Name of Contributor <i>Delphenia Gilbert</i>			Registration Number, if PAC	
Street Address <i>740 Pine Point Dr.</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Cash</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44333</i>	Date (MM/DD/YYYY) <i>12/05/17</i>	Amount <i>100</i>
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State <i>OH</i>	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 <i>OH</i>	Zip Code	Date (MM/DD/YYYY)	Amount

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**Statement of Other Income**

Form 31-A-2

R.C. 3517.10(B)

<b>Full Name of Committee</b> Re-Elect Judge Committee To Annalisa S. Williams			
<b>Full Name of Contributor</b> Dollar Tree		<b>Registration Number, if PAC</b>	
<b>Street Address</b> 3750 W. Market St Unit 8	<b>Type*</b> Refund <i>Uncashed</i>	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b> Fairlawn	<b>State</b> OH	<b>Zip Code</b> 44333	<b>Amount</b> 28.82
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>

\* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Committee To Re-Elect Judge Annalisa S. Williams			
<b>To Whom Paid</b> Annalisa S. Williams		<b>Date (MM/DD/YYYY)</b> 10/19/17	<b>Amount</b> 35500
<b>Street Address</b> 1263 Country Club Rd.		<b>Purpose</b> Loan Reimbursement	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44313	<b>Check Number</b> 1056
<b>To Whom Paid</b> Committee to Elect Judith Lynn Lee		<b>Date (MM/DD/YYYY)</b> 10/20/17	<b>Amount</b> 100
<b>Street Address</b> 3227 Creekside Drive		<b>Purpose</b> Fundraiser	
<b>City</b> Norton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1057
<b>To Whom Paid</b> NIMAS of Northeast Ohio		<b>Date (MM/DD/YYYY)</b> 10/21/17	<b>Amount</b> 45
<b>Street Address</b> c/o Eddie Omobien 2104 Brookshire Rd		<b>Purpose</b> Dinner	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44313	<b>Check Number</b> 1058
<b>To Whom Paid</b> Akron WAACP		<b>Date (MM/DD/YYYY)</b> 11/05/17	<b>Amount</b> 130
<b>Street Address</b> 230 W. Center St.		<b>Purpose</b> Fundraiser	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44302	<b>Check Number</b> 1059
<b>To Whom Paid</b> Martin Belsky		<b>Date (MM/DD/YYYY)</b> 11/06/17	<b>Amount</b> 50
<b>Street Address</b> 344 Village Point Dr. Apt. A		<b>Purpose</b> Contribution Reimbursement of over limit contribution	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44313	<b>Check Number</b> 1061

Page Total \$ 35825



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Committee To Re-Elect Judge Annalisa S. Williams			
To Whom Paid Sam's Club Stores		Date (MM/DD/YYYY) 11/07/17	Amount 107.74
Street Address 3750 W. Market St. Unit 3		Purpose Campaign supplies	
City Akron	State OH	Zip Code 44333	Check Number 1062
To Whom Paid Edward G. Ibert +		Date (MM/DD/YYYY) 11/06/17	Amount 100
Street Address 1 Cascade Plaza Suite 325		Purpose Contribution Reimbursement of over-limit contribution	
City Akron,	State OH	Zip Code 44308	Check Number 1061
To Whom Paid Key Bank		Date (MM/DD/YYYY) 11/30/17	Amount 25
Street Address P.O. Box 93885		Purpose Bank Fee	
City Cleveland	State OH	Zip Code 44101	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 232.74

Prior Loans  
Outstanding  
Balances  
**Statement of Loans Received**

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Committee to Re-Elect Judge Annalisa S. Williams</b>									
From Whom Received <b>Annalisa S. Williams</b>						Prior Amount <b>645.29</b>		Amt. Incurred this Period <b>0.00</b>	
Address <b>1263 Country Club Drive</b>									
City <b>Akron</b>				State <b>O/H</b>					
								Date	
								Amount	
Date Loan was originally incurred				M		D		Y	
1 0 2 9 0 3									
Registration Number, if PAC						M		D	
Employer/Occupation/Labor Organization*						M		D	
From Whom Received <b>Annalisa S. Williams</b>						Prior Amount <b>2,452.49</b>		Amt. Incurred this Period <b>0.00</b>	
Address <b>1263 Country Club Drive</b>									
City <b>Akron</b>				State <b>O/H</b>					
								Date	
								Amount	
Date Loan was originally incurred				M		D		Y	
1 1 0 1 9 5									
Registration Number, if PAC						M		D	
Employer/Occupation/Labor Organization*						M		D	
From Whom Received <b>Annalisa S. Williams</b>						Prior Amount <b>35,500.00</b>		Amt. Incurred this Period <b>0.00</b>	
Address <b>1263 Country Club Drive</b>									
City <b>Akron</b>				State <b>O/H</b>					
								Date	
								Amount	
Date Loan was originally incurred				M		D		Y	
1 0 1 5 9 9									
Registration Number, if PAC						M		D	
Employer/Occupation/Labor Organization*						M		D	

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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 Total Outstanding Balance to the cover page (Form No. 30-A).

- 1 Total prior amount \$ 38,597.78
- 2 Total received this period \$ 0.00 (To Form No. 31-A-2)
- 3 Total Payments this Period \$ 35,500 (also record on Form 31-B)
- 4 Total Outstanding Balance \$ 3097.78 (To Form No. 30-A)

# Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Committee to Re-Elect Judge Annalisa S. Williams</b>													
From Whom Received <b>James R. Williams</b>						Prior Amount <b>3,000.00</b>		Amt. Incurred this Period <b>0.00</b>					
Address <b>1733 Brookwood Drive</b>								Outstanding Balance <b>3,000.00</b>					
City <b>Akron</b>		State <b>OH</b>	Zip Code <b>44313</b>										
				Loans Received This Period			Payments This Period						
				Date			Date						
				Amount			Amount						
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$	
1 0 2 9 0 3													
Registration Number, if PAC						M		D	Y	M		D	Y
Employer/Occupation/Labor Organization*						M		D	Y	M		D	Y
From Whom Received <b>Annalisa S. Williams</b>						Prior Amount <b>2,500.00</b>		Amt. Incurred this Period <b>0.00</b>					
Address <b>1263 Country Club Drive</b>								Outstanding Balance <b>2,500.00</b>					
City <b>Akron</b>		State <b>OH</b>	Zip Code <b>44313</b>										
				Loans Received This Period			Payments This Period						
				Date			Date						
				Amount			Amount						
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$	
1 0 2 1 0 3													
Registration Number, if PAC						M		D	Y	M		D	Y
Employer/Occupation/Labor Organization*						M		D	Y	M		D	Y
From Whom Received <b>James R. Williams</b>						Prior Amount <b>10,000.00</b>		Amt. Incurred this Period <b>0.00</b>					
Address <b>1733 Brookwood Drive</b>								Outstanding Balance <b>10,000.00</b>					
City <b>Akron</b>		State <b>OH</b>	Zip Code <b>44313</b>										
				Loans Received This Period			Payments This Period						
				Date			Date						
				Amount			Amount						
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$	
1 0 2 9 0 3													
Registration Number, if PAC						M		D	Y	M		D	Y
Employer/Occupation/Labor Organization*						M		D	Y	M		D	Y

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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 Total Outstanding Balance to the cover page (Form No. 30-A).

- 1 Total prior amount \$ 15,500.00
- 2 Total received this period \$ 0.00 (To Form No. 31-A-2)
- 3 Total Payments this Period \$ 0.00 (also record on Form 31-B)
- 4 Total Outstanding Balance \$ 15,500.00 (To Form No. 30-A)



# Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Committee to Re-Elect Judge Annalisa S. Williams</b>												
From Whom Received <b>Annalisa S. Williams</b>						Prior Amount <b>5,000.00</b>		Amt. Incurred this Period <b>0.00</b>				
Address <b>1263 Country Club Drive</b>								Outstanding Balance <b>5,000.00</b>				
City <b>Akron</b>		State <b>OH</b>	Zip Code <b>44313</b>			Loans Received This Period			Payments This Period			
						Date			Date			
						Amount			Amount			
Date Loan was originally incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
0		5	0	8	0	3						
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			
						Date			Date			
						Amount			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			
						Date			Date			
						Amount			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

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- 1 Total prior amount \$ 5,000.00
- 2 Total received this period \$ 0.00 (To Form No. 31-A-2)
- 3 Total Payments this Period \$ 0.00 (also record on Form 31-B)
- 4 Total Outstanding Balance \$ 5,000.00 (To Form No. 30-A)