



LATE

Committee Name Gainer for Council		Office Sought Ward 1 Council		District Norton
Street Address 3920 Wadsworth Rd		City Norton	State OH	Zip 44203
Candidate Name OR PAC Registration Number James L Gainer		Treasurer Name Melissa S Sabo		Election Date (MM/DD/YYYY) 11/07/2017

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 <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.
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1. Amount brought forward from last report	126.00
2. Total monetary contributions (From Forms 31-A and 31-E)	285.00
3. Total other income (From Form 31-A-2)	1110.00
4. Total funds available (sum of lines 1,2, and 3)	1521.00
5. Total monetary expenditures (From Forms 31-B and 31-F)	1480.49
6. Balance on hand (line 4 minus line 5)	40.51
7. Value of in-kind contributions received (From Form 31-J-1)	0
8. Value of in-kind contributions made (From Form 31-J-2)	0
9. Outstanding loans owed by committee (From Form 31-C)	1286.73
10. Outstanding debts owed by committee (From Form 31-N)	0
11. Outstanding loans owed to committee (From Form 31-K)	0
12. Value of independent expenditures made (From Form 31-U)	

**OFFICIAL COPY
SUMMIT COUNTY
BOARD OF ELECTIONS**

2017 OCT 30 PM 1:32

#A 1564 AVC

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

Melissa Sabo

10/20/2017

Date (MM/DD/YYYY)

Signature of Treasurer or Deputy Treasurer

Contribution Pages 2	Expenditure Pages 6	Other Pages 2	Total Pages 11
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**Statement of Contributions Received
at a Social or Fund-Raising Event**

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

Full Name of Committee Gainer for Council				
Full Name of Contributor Cindy Webel			Registration Number, if PAC	
Street Address 3152 Trotter Rd		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/24/2017
				Amount 20.00
City Norton		State OH	Zip Code 44203	Form (Cash, Check, Etc) cash
Full Name of Contributor Missie Sabo			Registration Number, if PAC	
Street Address 2871 Brookfield Dr		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/24/2017
				Amount 50.00
City Norton		State OH	Zip Code 44203	Form (Cash, Check, Etc) check
Full Name of Contributor Robert Simpson			Registration Number, if PAC	
Street Address 4134 Tapper Rd		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/24/2017
				Amount 10.00
City Norton		State OH	Zip Code 44203	Form (Cash, Check, Etc) cash
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)
				Amount
City		State OH	Zip Code	Form (Cash, Check, Etc)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)
				Amount
City		State WV	Zip Code	Form (Cash, Check, Etc)

* 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
285.00

Total Expenditures This Event
322.01

Page Total \$ 80.00



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Gainer for Council			
To Whom Paid Harbor Freight		Date (MM/DD/YYYY) 08/22/2017	Amount 16.00
Street Address 3333 Manchester Rd		Purpose supplies	
City Akron	State OH	Zip Code 44319	Check Number debit card
To Whom Paid Lowes		Date (MM/DD/YYYY) 10/01/2017	Amount 10.76
Street Address 1065 Williams Reserve		Purpose supplies	
City Wadsworth	State OH	Zip Code 44281	Check Number cash
To Whom Paid Lowes		Date (MM/DD/YYYY) 10/02/2017	Amount 12.49
Street Address 1065 Williams Reserve		Purpose supplies	
City Wadsworth	State OH	Zip Code 44281	Check Number debit card
To Whom Paid Lowes		Date (MM/DD/YYYY) 09/22/2017	Amount 9.02
Street Address 1065 Williams Reserve		Purpose supplies	
City Wadsworth	State OH	Zip Code 44281	Check Number debit card
To Whom Paid Walmart		Date (MM/DD/YYYY) 10/05/2017	Amount 10.51
Street Address 222 Smokerise Dr		Purpose supplies	
City Wadsworth	State OH	Zip Code 44281	Check Number debit card

Page Total \$ 58.78



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Gainer for Council			
To Whom Paid Duchess		Date (MM/DD/YYYY) 10/03/2017	Amount 31.25
Street Address 3650 Wadsworth Rd		Purpose gas for campaign usage	
City Norton	State OH	Zip Code 44203	Check Number debit card
To Whom Paid Duchess		Date (MM/DD/YYYY) 10/08/2017	Amount 30.50
Street Address 3650 Wadsworth Rd		Purpose gas for campaign usage	
City Norton	State OH	Zip Code 44203	Check Number debit card
To Whom Paid GotPrint.com		Date (MM/DD/YYYY) 09/02/2017	Amount 37.06
Street Address 7651 N San Fernando Rd		Purpose stickers	
City Burbank	State CA	Zip Code 91505	Check Number debit card
To Whom Paid Vistaprint		Date (MM/DD/YYYY) 08/13/2017	Amount 28.80
Street Address 95 Hayden Ave		Purpose business cards	
City Lexington	State MA	Zip Code 02421	Check Number debit card
To Whom Paid Walmart		Date (MM/DD/YYYY) 10/08/2017	Amount 10.68
Street Address 222 Smokerise Dr		Purpose supplies	
City Wadsworth	State OH	Zip Code 44281	Check Number debit card

Page Total \$ 138.29



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Gainer for Council			
To Whom Paid Michaels		Date (MM/DD/YYYY) 09/03/2017	Amount 25.59
Street Address 3750 W Market St		Purpose supplies	
City Fairlawn	State OH	Zip Code 44333	Check Number debit card
To Whom Paid Office Depot		Date (MM/DD/YYYY) 09/03/2017	Amount 7.03
Street Address Williams Reserve		Purpose supplies	
City Wadsworth	State OH	Zip Code 44281	Check Number debit card
To Whom Paid Discount Mugs		Date (MM/DD/YYYY) 09/02/2017	Amount 217.20
Street Address 12610 NW. 115th Ave		Purpose t-shirts	
City Medley	State FL	Zip Code 33178	Check Number debit card
To Whom Paid RoboCent, Inc		Date (MM/DD/YYYY) 08/23/2017	Amount 36.15
Street Address 2129 General Booth Blvd		Purpose robocalls	
City Virginia Beach	State VA	Zip Code 23454	Check Number debit card
To Whom Paid RoboCent, Inc		Date (MM/DD/YYYY) 09/06/2017	Amount 30.00
Street Address 2129 General Booth Blvd		Purpose robocalls	
City Virginia Beach	State VA	Zip Code 23454	Check Number debit card

Page Total \$ 315.97



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Gainer for Council			
To Whom Paid Power Graphics		Date (MM/DD/YYYY) 09/15/2017	Amount 426.73
Street Address 3070 Wadsworth Rd		Purpose signs	
City Norton	State OH	Zip Code 44203	Check Number debit card
To Whom Paid Action Apparel		Date (MM/DD/YYYY) 09/19/2017	Amount 58.71
Street Address 3070 Wadsworth Rd		Purpose tshirts	
City Norton	State OH	Zip Code 44203	Check Number debit card
To Whom Paid RoboCent, Inc		Date (MM/DD/YYYY) 09/02/2017	Amount 50.00
Street Address 2129 General Booth Blvd		Purpose robocalls	
City Virginia Beach	State VA	Zip Code 23454	Check Number debit card
To Whom Paid Norton Cider Festival		Date (MM/DD/YYYY) 08/09/2017	Amount 110.00
Street Address Columbia Woods Dr		Purpose Parade & festival booth	
City Norton	State OH	Zip Code 44203	Check Number 5391
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State VA	Zip Code	Check Number

Page Total \$ 645.44



Statement of Expenditures for Social or Fund-Raising Event

Form 31-F
R.C. 3517.10

Full Name of Committee Gainer for Council				
To Whom Paid City of Norton		Date (MM/DD/YYYY) 09/24/2017	Amount 106.00	
Street Address 4060 Columbia Woods Dr		Purpose community center rental		
City Norton	State OH	Zip Code 44203	Check Number cash	
To Whom Paid Walmart		Date (MM/DD/YYYY) 09/21/2017	Amount 10.66	
Street Address 222 Smokerise Dr		Purpose fundraiser supplies		
City Wadsworth	State OH	Zip Code 44281	Check Number debit card	
To Whom Paid Home Depot		Date (MM/DD/YYYY) 09/21/2017	Amount 11.70	
Street Address 1155 High Street		Purpose fundraiser flowers		
City Wadsworth	State OH	Zip Code 44281	Check Number debit card	
To Whom Paid Dollar Tree		Date (MM/DD/YYYY) 09/21/2017	Amount 9.61	
Street Address 1154 Hinkle Drive		Purpose fundraiser supplies		
City Wadsworth	State OH	Zip Code 44281	Check Number debit card	
To Whom Paid Target		Date (MM/DD/YYYY) 09/21/2017	Amount 68.13	
Street Address Williams Reserve		Purpose fundraiser supplies		
City Wadsworth	State OH	Zip Code 44281	Check Number debit card	

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.



Statement of Expenditures for Social or Fund-Raising Event

Form 31-F
R.C. 3517.10

Full Name of Committee Gainer for Council				
To Whom Paid Acme		Date (MM/DD/YYYY) 09/24/2017		Amount 7.98
Street Address Greenwich Rd		Purpose fundraiser food		
City Norton	State OH	Zip Code 44203	Check Number cash	
To Whom Paid East of Chicago		Date (MM/DD/YYYY) 09/24/2017		Amount 91.95
Street Address 1317 Shannon Ave		Purpose fundraiser food		
City Barberton	State OH	Zip Code 44203	Check Number debit card	
To Whom Paid Giant Eagle		Date (MM/DD/YYYY) 09/21/2017		Amount 15.98
Street Address 825 Ambassador		Purpose fundraiser supplies		
City Wadsworth	State OH	Zip Code 44281	Check Number debit card	
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	

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 \$ **115.91**



Statement of Loans Received

Form 31-C

R.C. 3517.10

Full Name of Committee Gainer for Council					
From Whom Received Carleen Gainer				Prior Amount 0	Amt. Incurred this Period 1000.00
Street Address 3920 Wadsworth Rd					Outstanding Balance 1000.00
City Norton	State OH	Zip Code 44203	Loans Received This Period		Payments Received This Period
	Date of Original Loan (MM/DD/YYYY)	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
		08/09/2017	1000.00		
Registration Number, if PAC		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
Employer/Occupation/Labor Organization* Retired/spouse of candidate		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
From Whom Received Jack Gainer				Prior Amount 176.73	Amt. Incurred this Period 110.00
Street Address 3920 Wadsworth Rd					Outstanding Balance 286.73
City Norton	State OH	Zip Code 44203	Loans Received This Period		Payments Received This Period
	Date of Original Loan (MM/DD/YYYY)	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
	01/30/2017	09/07/2017	110.00		
Registration Number, if PAC		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount
Employer/Occupation/Labor Organization* candidate		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (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)]

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

Total Prior Amount \$ 176.73

Total Received This Period \$ 1110.00 (also record on Form 31-A-2)

Total Payments Received this Period \$ 0 (also record on Form 31-B)

Total Outstanding Balance \$ 1286.73 (also record on Form 30-A)



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee Gainer for Council			
Full Name of Contributor Carleen Gainer			Registration Number, if PAC
Street Address 3920 Wadsworth Rd	Type* Loan Payments Received	Date (MM/DD/YYYY) 08/09/2017	Form (Cash, Check, etc.) check
City Norton	State OH	Zip Code 44203	Amount 1000.00
Full Name of Contributor Jack Gainer			Registration Number, if PAC
Street Address 3920 Wadsworth Rd	Type* Loan Payments Received	Date (MM/DD/YYYY) 09/07/2017	Form (Cash, Check, etc.) check
City Norton	State OH	Zip Code 44203	Amount 110.00
Full Name of Contributor			Registration Number, if PAC
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor			Registration Number, if PAC
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor			Registration Number, if PAC
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount

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

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

Full Name of Committee Gainer for Council				
Full Name of Contributor Larry Perkins			Registration Number, if PAC	
Street Address 3844 S Neitz Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/24/2017	Amount 20.00
City Norton	State OH	Zip Code 44203	Form (Cash, Check, Etc) cash	
Full Name of Contributor Sean Bogner			Registration Number, if PAC	
Street Address 2859 Littleton Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/24/2017	Amount 40.00
City Norton	State OH	Zip Code 44203	Form (Cash, Check, Etc) cash	
Full Name of Contributor Rosemary Goff			Registration Number, if PAC	
Street Address 3046 Fair Oaks	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/24/2017	Amount 25.00
City Norton	State OH	Zip Code 44203	Form (Cash, Check, Etc) check	
Full Name of Contributor Tom Gainer			Registration Number, if PAC	
Street Address 362 17th Street	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/24/2017	Amount 20.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) cash	
Full Name of Contributor John Gainer			Registration Number, if PAC	
Street Address 20 Cabern Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/24/2017	Amount 100.00
City Hurricane	State WV	Zip Code 25526	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
285.00

Total Expenditures This Event
322.01

Page Total \$ 205.00