

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee Brubaker for Engineer						Registration Number, if PAC					
Full Name of Candidate Alan Brubaker											
Street Address 1474 Blair Drive						Office Sought Summit Co Engineer			District Countywide		
City Akron						State O H		Zip Code 44312			
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General			Post-General		X	
	July Monthly		August Monthly		September Monthly			Termination		Annual Year 2017	
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date of Election		M 1	D 1	Y 0	M 8	Y 1	D 6

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 at 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	\$ 75,773.71
2. Total monetary contributions (From Form No. 31-A)	\$ 250.00
3. Total other income (From Form No. 31-A-2)	\$
4. Total funds available (sum of lines 1, 2, 3)	\$ 76,023.71
5. Total monetary expenditures (From Form No. 31-B)	\$ 17,095.00
6. Balance on hand (line 4 minus line 5)	\$ 58,928.71
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$
9. Outstanding loans owed by committee (From Form No. 31-G)	\$ 1,000.00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	\$ 15,000.00
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	\$

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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

Jennifer H (Bheam) Tultz, Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature



1/10/2018

Date

Contribution pages 2

Expenditure pages 3

Other pages 4-8

Total pages 8

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Brubaker for Engineer									
Full Name of Contributor Martin Hilovsky						Registration Number, if PAC			
Street Address 3036 Hillside Trail				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City Stow		State OH		Zip Code 44224		M 0	D 7	Y 2017	Amount 250.00
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
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
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
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
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
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
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 appear. [R.C. 3517.10(B)(4)]

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Brubaker for Engineer									
To Whom Paid Friends of Jeff Fusco					M	D	Y	Amount	
					0	9	16	17	250.00
Address 2117 Forest Oak Drive			Purpose Fundraiser contribution						
City Akron		State OH	Zip Code 44312		Check Number 1327				
To Whom Paid Summit County Democratic Party					M	D	Y	Amount	
					0	9	16	17	1,500.00
Address 438 Grant St			Purpose Mayoral fundraiser contribution						
City Akron		State OH	Zip Code 44311		Check Number 1328				
To Whom Paid Summit County Deputies FOP Lodge 139					M	D	Y	Amount	
					1	0	16	17	145.00
Address 520 South Main St, Ste 2417			Purpose Fundraiser contribution						
City Akron		State OH	Zip Code 44311		Check Number 1329				
To Whom Paid Committee to Elect Don Walters					M	D	Y	Amount	
					1	2	22	17	15,000.00
Address 3395 Pendleton St			Purpose Loan						
City Cuyahoga Falls		State OH	Zip Code 44221		Check Number 1302				
To Whom Paid Summit County Democratic Party					M	D	Y	Amount	
					1	2	07	17	200.00
Address 438 Grant St			Purpose Fundraiser contribution						
City Akron		State OH	Zip Code 44311		Check Number 1331				
To Whom Paid					M	D	Y	Amount	
Address			Purpose						
City		State	Zip Code		Check Number				
To Whom Paid					M	D	Y	Amount	
Address			Purpose						
City		State	Zip Code		Check Number				
To Whom Paid					M	D	Y	Amount	
Address			Purpose						
City		State	Zip Code		Check Number				

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee Brubaker for Engineer														
From Whom Received Lawrence W Fulton								Prior Amount 1,000.00			Amt. Incurred this Period 0.00			
Address 12380 Raymond Drive											Outstanding Balance 1,000.00			
City Chardon		State OH	Zip Code 44024			Loans Received This Period			Payments This Period					
						Date			Date		Amount			
Date Loan was originally Incurred		M	D	Y	M			D	Y	\$	M	D	Y	\$
0		8	2	0	1			2	0					
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			
Date Loan was originally Incurred		M	D	Y	M			D	Y	\$	M	D	Y	\$
											0			
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			
Date Loan was originally Incurred		M	D	Y	M			D	Y	\$	M	D	Y	\$
											0			
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			
Date Loan was originally Incurred		M	D	Y	M			D	Y	\$	M	D	Y	\$
											0			
Registration Number, if PAC					M	D	Y	M	D	Y				
Employer/Occupation/Labor Organization*					M	D	Y	M	D	Y				

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees donate via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must 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 Total Outstanding Balance to the cover page (Form No. 30-A).

- 1 Total prior amount \$ 1,000.00
- 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 \$ 1,000.00 (To Form No. 30-A)

Statement of Loans Made

Prescribed by Secretary of State 2/01

Full Name of Committee Brubaker for Engineer										
To Whom Made Committee to Elect Don Walters						Prior Amount 0.00		Amt. Loaned this Period 15,000.00		
Address 3395 Pendleton Street								Outstanding Balance 15,000.00		
City Cuyahoga Falls				State OH		Zip Code 44221		Payments Received This Period		
						Date		Amount		
Date Loan was originally Made						M	D	Y	\$	
						1	2	2	1	7
									0.00	
						M	D	Y		
						M	D	Y		
To Whom Made						Prior Amount		Amt. Loaned this Period		
Address								Outstanding Balance		
City				State		Zip Code		Payments Received This Period		
						Date		Amount		
Date Loan was originally Made						M	D	Y	\$	
						M	D	Y		
						M	D	Y		
To Whom Made						Prior Amount		Amt. Loaned this Period		
Address								Outstanding Balance		
City				State		Zip Code		Payments Received This Period		
						Date		Amount		
Date Loan was originally Made						M	D	Y	\$	
						M	D	Y		
						M	D	Y		

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans made this period to the Statement of Expenditures (Form No. 31-B). Transfer total of all payments received in this period to the Statement of Other Income (Form No. 31-A-2). Transfer Total Outstanding Balance to the cover page.

Total Loans this Period \$ 15,000.00 (also record on Form 31-B)

Total Outstanding Balance \$ 0.00 (also record on cover page)

Total Payments Received this Period \$ 0.00 (also recorded on Forms 31-A-2)