



Committee Name <b>FRIENDS OF VIC PALLOTTA</b>		Office Sought <b>CUYAHOGA FALLS City Council</b>	District
Street Address <b>407 Marian Lake BLVD</b>		City <b>CUYAHOGA FALLS OH</b>	Zip <b>44223</b>
Candidate Name OR PAC Registration Number <b>VICTOR L. PALLOTTA</b>		Treasurer Name <b>DAPHNE Sturkey</b>	Election Date (MM/DD/YYYY) <b>11-07-17</b>
Type of Report (choose one): <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Post-Primary <input type="checkbox"/> Pre-General <input type="checkbox"/> Post-General			
Statewide Candidates Only: <input type="checkbox"/> July Monthly <input type="checkbox"/> August Monthly <input type="checkbox"/> September Monthly			Year <b>2018</b>
Amended Report <input 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	583.71
2. Total monetary contributions (From Forms 31-A and 31-E)	70.00
3. Total other income (From Form 31-A-2)	0
4. Total funds available (sum of lines 1, 2, 3)	653.71
5. Total monetary expenditures (From Forms 31-B and 31-F)	270.00
6. Balance on hand (line 4 minus line 5)	383.71
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)	
10. Outstanding debts owed by committee (From Form 31-N)	
11. Outstanding loans owed to committee (From Form 31-K)	
12. Value of independent expenditures made (From Form 31-U)	

OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS

2018 JAN 31 AM 11:14

#1893 AW

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

*Daphne Sturkey*  
Signature of Treasurer or Deputy Treasurer

**01-30-2018**  
Date (MM/DD/YYYY)

Contribution Pages <b>1</b>	Expenditure Pages <b>1</b>	Other Pages <b>1</b>	Total Pages <b>3</b>
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**Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee <b>FRIENDS OF Vic Pallotta</b>				
Full Name of Contributor <b>Jessica/Adam Miller</b>			Registration Number, if PAC	
Street Address <b>100 Alameda Av</b>		Employer/Occupation/Labor Organization*		Form (Cash, <input checked="" type="checkbox"/> Check, etc.) <b>784</b>
City <b>CUYA HOGA FALLS</b>	State <b>OH</b>	Zip Code <b>44221</b>	Date (MM/DD/YYYY) <b>12/23/2017</b>	Amount <b>35.00</b>
Full Name of Contributor <b>Jeff Iula (Friends of)</b>			Registration Number, if PAC	
Street Address <b>2597 24<sup>th</sup> ST</b>		Employer/Occupation/Labor Organization*		Form (Cash, <input checked="" type="checkbox"/> Check, etc.) <b>183</b>
City <b>CUYA HOGA FALLS</b>	State <b>OH</b>	Zip Code <b>44223</b>	Date (MM/DD/YYYY) <b>12/20/2017</b>	Amount <b>35.00</b>
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State <b>OH</b>	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 <b>OH</b>	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 <b>OH</b>	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**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> FRIENDS OF Vic Pallotta			
<b>To Whom Paid</b> Marcine Supelak		<b>Date (MM/DD/YYYY)</b> 12-17-17	<b>Amount</b> 270. <sup>00</sup>
<b>Street Address</b> 1904 Bender Lane		<b>Purpose</b> News Falls Press Web Banners	
<b>City</b> Copley	<b>State</b> OH OH	<b>Zip Code</b> 44321	<b>Check Number</b> 09116221
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>	
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Check Number</b>
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>	
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Check Number</b>
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>	
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Check Number</b>
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>	
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Check Number</b>

Page Total \$ 270.<sup>00</sup>