

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee The David Worhatch Committee						Registration Number, if PAC								
Full Name of Candidate David Worhatch														
Street Address 4920 Darrow Road				Office Sought Summit County Council		District 3								
City Stow				State OH		Zip Code 44224								
Type of Report (place X to the left of report type)	<input type="checkbox"/>	Pre-Primary	<input checked="" type="checkbox"/>	Post-Primary	<input type="checkbox"/>	Pre-General	<input type="checkbox"/>	Post-General	<input type="checkbox"/>	Annual Year				
	<input type="checkbox"/>	July Monthly	<input type="checkbox"/>	August Monthly	<input type="checkbox"/>	September Monthly	<input type="checkbox"/>	Termination	<input type="checkbox"/>	Semiannual				
Amended Report? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date of Election		1	M	1	D	0	8	1	Y	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 for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(11) for details.

1. Amount brought forward from last report	\$	\$0.00
2. Total monetary contributions (From Form No. 31-A)	\$	\$330.00
3. Total other income (From Form No. 31-A-2)	\$	\$1.00
4. Total funds available (From Form No. 31-B)	\$	\$331.00
5. Total monetary expenditures (From Form No. 31-D)	\$	\$330.00
6. Balance on hand (line 4 minus line 5)	\$	\$1.00
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	\$125.00
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	\$0.00
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	\$17,476.83
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	\$0.00
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	\$0.00
12. Value of independent expenditures made (From Form No. 31-U)	\$	\$0.00
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$	

OFFICIAL COPY
SUMMIT COUNTY
BOARD OF ELECTIONS

2016 APR 21 PM 3:52
 SUMMIT COUNTY
 BOARD OF ELECTIONS
 AKRON, OHIO
 11/24 BAP

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.

Sara L. Schuster, Treasurer

Sara L. Schuster
Signature

04/21/2016

Print Name and Title (Treasurer and Deputy Treasurer only)

Date

Contribution pages 1

Expenditure pages 1

Other pages 5

Total pages 7

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full The David Worhatch Committee									
Full Name of Contributor John C. Schmidt							Registration Number, if PAC		
Street Address 1460 Curtis Avenue				Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Cash		
City Cuyahoga Falls		State OH	Zip Code 44221		M 1	D 2	Y 1	Y 5	Amount \$80.00
Full Name of Contributor Citizens for Schmidt							Registration Number, if PAC		
Street Address 1460 Curtis Avenue				Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.)		
City Cuyahoga Falls		State OH	Zip Code 44221		M 0	D 3	Y 0	Y 2	Amount \$250.00
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.)		
City		State OH	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 OH	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 OH	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 OH	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 OH	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 OH	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 also appear. [R.C. 3517.10(B)(4)]

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full The David Worhatch Committee						
To Whom Paid Summit County Board of Elections			M	D	Y	Amount
			1	2	1	\$50.00
Address 470 Grant Street		Purpose Part of filing fee for Declaration of Write-In Candidacy				
City Akron	State OH	Zip Code 44311	Check Number			
To Whom Paid Summit County Board of Elections			M	D	Y	Amount
			1	2	1	\$30.00
Address 470 Grant Street		Purpose Balance of filing fee for Declaration of Write-In Candidacy				
City Akron	State OH	Zip Code 44311	Check Number			
To Whom Paid S. David Worhatch			M	D	Y	Amount
			0	4	1	\$60.00
Address 4920 Darrow Road		Purpose Reimbursement of expense (2/24/16 filing fee for Financial Disclosure Statement)				
City Stow	State OH	Zip Code 44224	Check Number			
To Whom Paid S. David Worhatch			M	D	Y	Amount
			0	4	1	\$75.00
Address 4920 Darrow Road		Purpose Reimbursement of expense (3/3/16 Labels & Letters processing fee for mailers)				
City Stow	State OH	Zip Code 44224	Check Number			
To Whom Paid S. David Worhatch			M	D	Y	Amount
			0	4	1	\$82.98
Address 4920 Darrow Road		Purpose Reimbursement of expense (3/3/16 postage for mailers)				
City Stow	State OH	Zip Code 44224	Check Number			
To Whom Paid S. David Worhatch			M	D	Y	Amount
			0	4	1	\$5.00
Address 4920 Darrow Road		Purpose Retirement of committee loan debt incurred on 11/25/96				
City Stow	State OH	Zip Code 44224	Check Number			
To Whom Paid S. David Worhatch			M	D	Y	Amount
			0	4	1	\$27.02
Address 4920 Darrow Road		Purpose Partial retirement of committee loan debt incurred on 10/25/00				
City Stow	State OH	Zip Code 44224	Check Number			
To Whom Paid			M	D	Y	Amount
Address						
City						
	State OH	Zip Code	Check Number			

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee The David Worhatch Committee													
From Whom Received S. David Worhatch						Prior Amount \$1,299.80			Amt. Incurred this Period \$0.00				
Address 4920 Darrow Road									Outstanding Balance \$1,299.80				
City Stow		State OH		Zip Code 44224		Loans Received This Period Date Amount			Payments This Period Date Amount				
Date Loan was originally Incurred		M	D	Y	\$	M	D	Y	\$	M	D	Y	\$
0 3 2 1 9 4													
Registration Number, if PAC						M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization* Law Offices of S. David Worhatch						M	D	Y		M	D	Y	
From Whom Received S. David Worhatch						Prior Amount \$3,000.00			Amt. Incurred this Period \$0.00				
Address 4920 Darrow Road									Outstanding Balance \$3,000.00				
City Stow		State OH		Zip Code 44224		Loans Received This Period Date Amount			Payments This Period Date Amount				
Date Loan was originally Incurred		M	D	Y	\$	M	D	Y	\$	M	D	Y	\$
1 0 2 2 9 6													
Registration Number, if PAC						M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization* Law Offices of S. David Worhatch						M	D	Y		M	D	Y	
From Whom Received S. David Worhatch						Prior Amount \$1,000.00			Amt. Incurred this Period \$0.00				
Address 4920 Darrow Road									Outstanding Balance \$1,000.00				
City Stow		State OH		Zip Code 44224		Loans Received This Period Date Amount			Payments This Period Date Amount				
Date Loan was originally Incurred		M	D	Y	\$	M	D	Y	\$	M	D	Y	\$
1 0 2 4 9 6													
Registration Number, if PAC						M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization* Law Offices of S. David Worhatch						M	D	Y		M	D	Y	

* 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).

- ¹ Total prior amount \$ \$5,299.80
- ² Total received this period \$ \$0.00 (To Form No. 31-A-2)
- ³ Total payments this period \$ \$0.00 (To Form No. 31-B)
- ⁴ Total Outstanding Balance \$ \$5,299.80 (To Form No. 30-A)

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee The David Worhatch Committee																	
From Whom Received S. David Worhatch							Prior Amount \$5,000.00			Amt. Incurred this Period \$0.00							
Address 4920 Darrow Road										Outstanding Balance \$5,000.00							
City Stow		State OH		Zip Code 44224			Loans Received This Period Date Amount			Payments This Period Date Amount							
Date Loan was originally Incurred		M	D	Y	\$	M	D	Y	\$	M	D	Y	\$				
1		0	3	1	9	6				0		4	1	4	1	6	\$5.00
Registration Number, if PAC							M	D	Y		M	D	Y				
Employer/Occupation/Labor Organization* Law Offices of S. David Worhatch							M	D	Y		M	D	Y				
From Whom Received S. David Worhatch							Prior Amount \$5.00			Amt. Incurred this Period \$0.00							
Address 4920 Darrow Road										Outstanding Balance \$0.00							
City Stow		State OH		Zip Code 44224			Loans Received This Period Date Amount			Payments This Period Date Amount							
Date Loan was originally Incurred		M	D	Y	\$	M	D	Y	\$	M	D	Y	\$				
1		1	2	5	9	6				0		4	1	4	1	6	\$5.00
Registration Number, if PAC							M	D	Y		M	D	Y				
Employer/Occupation/Labor Organization* Law Offices of S. David Worhatch							M	D	Y		M	D	Y				
From Whom Received S. David Worhatch							Prior Amount \$1,500.00			Amt. Incurred this Period \$0.00							
Address 4920 Darrow Road										Outstanding Balance \$1,500.00							
City Stow		State OH		Zip Code 44224			Loans Received This Period Date Amount			Payments This Period Date Amount							
Date Loan was originally Incurred		M	D	Y	\$	M	D	Y	\$	M	D	Y	\$				
0		4	1	1	0	0				0		4	1	1	0	0	
Registration Number, if PAC							M	D	Y		M	D	Y				
Employer/Occupation/Labor Organization* Law Offices of S. David Worhatch							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 Outstanding Balance to the Cover page (Form No. 30-A).

- ¹ Total prior amount \$ \$6,505.00
- ² Total received this period \$ \$0.00 (To Form No. 31-A-2)
- ³ Total payments this period \$ \$5.00 (To Form No. 31-B)
- ⁴ Total Outstanding Balance \$ \$6,500.00 (To Form No. 30-A)

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee The David Worhatch Committee													
From Whom Received S. David Worhatch								Prior Amount \$1,000.00		Amt. Incurred this Period \$0.00			
Address 4920 Darrow Road										Outstanding Balance \$1,000.00			
City Stow		State OH		Zip Code 44224		Loans Received This Period				Payments This Period			
						Date		Amount		Date		Amount	
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$	
0 6 1 2 0 0													
Registration Number, if PAC													
Employer/Occupation/Labor Organization*													
Law Offices of S. David Worhatch													
From Whom Received S. David Worhatch								Prior Amount \$1,336.31		Amt. Incurred this Period \$0.00			
Address 4920 Darrow Road										Outstanding Balance \$1,336.31			
City Stow		State OH		Zip Code 44224		Loans Received This Period				Payments This Period			
						Date		Amount		Date		Amount	
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$	
0 7 3 1 0 0													
Registration Number, if PAC													
Employer/Occupation/Labor Organization*													
Law Offices of S. David Worhatch													
From Whom Received S. David Worhatch								Prior Amount \$400.00		Amt. Incurred this Period \$0.00			
Address 4920 Darrow Road										Outstanding Balance \$400.00			
City Stow		State OH		Zip Code 44224		Loans Received This Period				Payments This Period			
						Date		Amount		Date		Amount	
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$	
0 8 0 8 0 0													
Registration Number, if PAC													
Employer/Occupation/Labor Organization*													
Law Offices of S. David Worhatch													

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

¹ Total prior amount \$ \$2,736.31

² Total received this period \$ \$0.00 (To Form No. 31-A-2)

³ Total payments this period \$ \$0.00 (To Form No. 31-B)

⁴ Total Outstanding Balance \$ \$2,736.31 (To Form No. 30-A)

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee The David Worhatch Committee																	
From Whom Received S. David Worhatch						Prior Amount \$1,621.30			Amt. Incurred this Period \$0.00								
Address 4920 Darrow Road									Outstanding Balance \$1,621.30								
City Stow		State OH		Zip Code 44224		Loans Received This Period			Payments This Period								
						Date			Date								
						Amount			Amount								
Date Loan was originally Incurred		M		D		Y		\$		M		D		Y		\$	
0 8 1 6 0 0										0 4 1 4 1 6						\$27.02	
Registration Number, if PAC						M			D			Y					
Employer/Occupation/Labor Organization*						M			D			Y					
Law Offices of S. David Worhatch																	
From Whom Received S. David Worhatch						Prior Amount \$1,345.44			Amt. Incurred this Period \$0.00								
Address 4920 Darrow Road									Outstanding Balance \$1,318.42								
City Stow		State OH		Zip Code 44224		Loans Received This Period			Payments This Period								
						Date			Date								
						Amount			Amount								
Date Loan was originally Incurred		M		D		Y		\$		M		D		Y		\$	
1 0 2 5 0 0										0 4 1 4 1 6						\$27.02	
Registration Number, if PAC						M			D			Y					
Employer/Occupation/Labor Organization*						M			D			Y					
Law Offices of S. David Worhatch																	
From Whom Received S. David Worhatch						Prior Amount \$0.00			Amt. Incurred this Period \$1.00								
Address 4920 Darrow Road									Outstanding Balance \$1.00								
City Stow		State OH		Zip Code 44224		Loans Received This Period			Payments This Period								
						Date			Date								
						Amount			Amount								
Date Loan was originally Incurred		M		D		Y		\$		M		D		Y		\$	
0 4 1 5 1 6								\$1.00									
Registration Number, if PAC						M			D			Y					
Employer/Occupation/Labor Organization*						M			D			Y					
Law Offices of S. David Worhatch																	

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

¹ Total prior amount \$ \$2,966.74

² Total received this period \$ \$1.00 (To Form No. 31-A-2)

³ Total payments this period \$ \$27.02 (To Form No. 31-B)

⁴ Total Outstanding Balance \$ \$2,940.72 (To Form No. 30-A)

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full The David Worhatch Committee											
Full Name of Contributor Summit County Democratic Party		Employer, Occupation, Labor Organization*									
Street Address 438 Grant Street		Description of Item or Service Mailing list for mailer addressees									
City Akron		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px;">M</td> <td style="width: 25px;">D</td> <td style="width: 25px;">Y</td> <td style="width: 25px;">Fair Market Value</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">3</td> <td style="text-align: center;">0</td> <td style="text-align: center;">\$50.00</td> </tr> </table>		M	D	Y	Fair Market Value	0	3	0	\$50.00
M	D	Y	Fair Market Value								
0	3	0	\$50.00								
State OH		Zip Code 44311									
Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO											
Full Name of Contributor Summit County Democratic Party		Employer, Occupation, Labor Organization*									
Street Address 438 Grant Street		Description of Item or Service Use of party's permit for mailers									
City Akron		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px;">M</td> <td style="width: 25px;">D</td> <td style="width: 25px;">Y</td> <td style="width: 25px;">Fair Market Value</td> </tr> <tr> <td style="text-align: center;">0</td> <td style="text-align: center;">3</td> <td style="text-align: center;">0</td> <td style="text-align: center;">\$75.00</td> </tr> </table>		M	D	Y	Fair Market Value	0	3	0	\$75.00
M	D	Y	Fair Market Value								
0	3	0	\$75.00								
State OH		Zip Code 44311									
Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO											
Full Name of Contributor		Employer, Occupation, Labor Organization*									
Street Address		Description of Item or Service									
City		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px;">M</td> <td style="width: 25px;">D</td> <td style="width: 25px;">Y</td> <td style="width: 25px;">Fair Market Value</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>		M	D	Y	Fair Market Value				
M	D	Y	Fair Market Value								
State OH		Zip Code									
Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO											
Full Name of Contributor		Employer, Occupation, Labor Organization*									
Street Address		Description of Item or Service									
City		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px;">M</td> <td style="width: 25px;">D</td> <td style="width: 25px;">Y</td> <td style="width: 25px;">Fair Market Value</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>		M	D	Y	Fair Market Value				
M	D	Y	Fair Market Value								
State OH		Zip Code									
Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO											
Full Name of Contributor		Employer, Occupation, Labor Organization*									
Street Address		Description of Item or Service									
City		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px;">M</td> <td style="width: 25px;">D</td> <td style="width: 25px;">Y</td> <td style="width: 25px;">Fair Market Value</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>		M	D	Y	Fair Market Value				
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State OH		Zip Code									
Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO											
Full Name of Contributor		Employer, Occupation, Labor Organization*									
Street Address		Description of Item or Service									
City		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px;">M</td> <td style="width: 25px;">D</td> <td style="width: 25px;">Y</td> <td style="width: 25px;">Fair Market Value</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>		M	D	Y	Fair Market Value				
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State OH		Zip Code									
Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO											
Full Name of Contributor		Employer, Occupation, Labor Organization*									
Street Address		Description of Item or Service									
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State OH		Zip Code									
Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO											
Full Name of Contributor		Employer, Occupation, Labor Organization*									
Street Address		Description of Item or Service									
City		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px;">M</td> <td style="width: 25px;">D</td> <td style="width: 25px;">Y</td> <td style="width: 25px;">Fair Market Value</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>		M	D	Y	Fair Market Value				
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State OH		Zip Code									
Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO											

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