



Committee Name <i>Paula Prentice Committee</i>		Office Sought <i>County Council</i>		District <i>8</i>
Street Address <i>4235 Aldawood Hills Dr</i>		City <i>Akron</i>	State <i>OH</i>	Zip <i>44319</i>
Candidate Name OR PAC Registration Number <i>Paula Prentice</i>		Treasurer Name <i>Katie Stoyhoff</i>		Election Date (MM/DD/YYYY)
Type of Report (choose one): <input type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input checked="" 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				
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>4,439.95</i>
2. Total monetary contributions (From Forms 31-A and 31-E)	<i>0</i>
3. Total other income (From Form 31-A-2)	<i>0</i>
4. Total funds available (sum of lines 1, 2, 3)	<i>4,439.95</i>
5. Total monetary expenditures (From Forms 31-B and 31-F)	<i>1,050.00</i>
6. Balance on hand (line 4 minus line 5)	<i>3,389.95</i>
7. Value of in-kind contributions received (From Form 31-J-1)	<i>0</i>
8. Value of in-kind contributions made (From Form 31-J-2)	<i>0</i>
9. Outstanding loans owed by committee (From Form 31-C)	<i>21,600.00</i>
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 APR 26 AM 11:42

NO OF ELECTIONS
AKRON, OHIO

#2134

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

Paula Prentice
Signature of Treasurer or Deputy Treasurer

4/26/2018
Date (MM/DD/YYYY)

Contribution Pages
1

Expenditure Pages
1

Other Pages
1

Total Pages
2



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Paula Prentice Committee			
To Whom Paid D J Luciano		Date (MM/DD/YYYY) 4/11/2018	Amount \$1000.
Street Address 613 Gibbs Rd		Purpose Fundraiser Coordinator	
City Akron	State OH	Zip Code 44312	Check Number 1239
To Whom Paid Liz Walters		Date (MM/DD/YYYY) 4/13/2018	Amount 50.00
Street Address 84 Casterton Ave #4		Purpose Fundraiser	
City AKRON	State OH	Zip Code 44303	Check Number 1238
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
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ _____



Statement of Loans Received

Form 31-C

R.C. 3517.10

Full Name of Committee Paula Prentice Committee					
From Whom Received David E Prentice				Prior Amount 21,600.00	Amt. Incurred this Period 0
Street Address 4235 Aldowood Hills Dr				Outstanding Balance 21,600.00	
City AKRON	State OH	Zip Code 44319	Loans Received This Period		Payments This Period
Date Loan was Originally Incurred (MM/DD/YYYY) 10/2/04			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)
Registration Number, if PAC			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)
From Whom Received				Prior Amount	Amt. Incurred this Period
Street Address				Outstanding Balance	
City	State	Zip Code	Loans Received This Period		Payments This Period
Date Loan was Originally Incurred (MM/DD/YYYY)			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)
Registration Number, if PAC			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)

* 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 \$ 21,600.

Total Received This Period \$ 0 (also record on Form 31-A-2)

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

Total Outstanding Balance \$ 21,600. (also record on Form 30-A)