



Committee Name Laborers' Local #894 PAC Fund		Office Sought		District
Street Address 720 Wolf Ledges Parkway		City Akron	State Oh	Zip 44311
Candidate Name OR PAC Registration Number #LA236		Treasurer Name William E. Orr		Election Date (MM/DD/YYYY) 05/08/2018
Type of Report (choose one): <input type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input type="checkbox"/> Pre-Primary <input checked="" 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 2018
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	-251.69
2. Total monetary contributions (From Forms 31-A and 31-E)	4650.00
3. Total other income (From Form 31-A-2)	0
4. Total funds available (sum of lines 1, 2, 3)	4398.31
5. Total monetary expenditures (From Forms 31-B and 31-F)	1530.00
6. Balance on hand (line 4 minus line 5)	2868.31
7. Value of in-kind contributions received (From Form 31-J-1)	0.00
8. Value of in-kind contributions made (From Form 31-J-2)	0.00
9. Outstanding loans owed by committee (From Form 31-C)	0.00
10. Outstanding debts owed by committee (From Form 31-N)	0.00
11. Outstanding loans owed to committee (From Form 31-K)	0.00
12. Value of independent expenditures made (From Form 31-U)	0.00

OFFICIAL COPY
SUMMIT COUNTY
BOARD OF ELECTIONS

2018 JUN 15 PM 12:29

AKRON, OHIO

#21618

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

William E. Orr

Signature of Treasurer or Deputy Treasurer

06/14/2018

Date (MM/DD/YYYY)

Contribution Pages
13

Expenditure Pages
1

Other Pages
5

Total Pages
19

Instructions for the Ohio Campaign Finance Report (Cover Page) Form 30-A

The Ohio Campaign Finance Report, commonly referred to as the Cover Page, identifies the committee filing the report and what reporting period is covered. It also summarizes the details of the report. The cover page is not a substitute for listing detailed information on the appropriate forms, unless the committee qualifies for the Short Form Report (see below).

Committee Information

Complete the top section of the form with all the information required for the specific type of committee.

Type of Report

Select the type of report being filed and enter the appropriate year. Only statewide candidates file monthly reports, and only in the year in which they run for election.

Amended Report

Amended Report should be marked "No" for all original reports. The box should be marked "Yes" only if the report is being filed to correct, add to, or in some way change a report that has already been filed. Do not combine a corrected report with an original filing (e.g., do not attach canceled check copies from a prior report to a subsequent report).

Terminations

The Cover Page is the means by which a committee may terminate. If the committee has no debts, no loans, and no balance on hand and the committee wishes to close, mark the box in the Termination section.

Short Form Report

If a candidate has no activity before January 1 of the year in which the candidate appears on the ballot, and spends \$500 or less and receives \$500 or less in that same year in which the candidate appears on the ballot, then only the cover page of the campaign finance report is required to be filed at either the post-primary or post-general filing deadline. If a candidate is filing a Short Form Report, mark the box in this section. For more information on the Short Form Report requirements, please see Chapter 2 of the Ohio Campaign Finance Handbook.

Activity (lines 1 through 12)

Lines 1 through 6 relate to the actual monetary transactions (contributions, other income/interest, and expenditures) that occurred during the reporting period for which the report is being filed.

Line 1 should be the same as the ending balance on hand of the last report filed. For a newly established committee, this line will reflect \$0.

Lines 2, 3, and 5 should be completed by transferring the amounts from the corresponding forms to the Cover Page.

Lines 4 and 6 should be computed as the form instructs. *Note:* Line 6 should never reflect a negative number, as that would indicate the committee spent more than it received.

Lines 7 through 12 are statements of valuation for non-monetary transactions, as disclosed on the corresponding forms. These totals will not affect the Line 6 total.

If there is no activity corresponding to a line, that line total should reflect \$0.

Signatures

A candidate campaign committee report must be signed by the treasurer or deputy treasurer. A candidate cannot sign the report unless he or she is the treasurer or deputy treasurer. PAC, PCE, political party and legislative campaign committee reports must be signed by the treasurer or deputy treasurer.

Cover Page Numbering Guide -

Contribution Pages: 31-A, 31-A-2, 31-E, 31-J-1, 31-G, 30-C, 31-P, 31-R, 31-T

Expenditure Pages: 31-B, 31-F, 31-J-2, 31-I, 31-M, 31-U

Other Pages: 30-A, 31-C, 31-N, 31-K

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor BRIAN SAMPEL					Registration Number, if PAC		
Street Address 3061 13TH STREET		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CUYAHOGA FALLS	State O H	Zip Code 44223	M 0	D 4	Y 1 9 1 8	Amount 25.00	
Full Name of Contributor HENREY GARCIA					Registration Number, if PAC		
Street Address 3122 WESTWOOD NORTHERN		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CINCINNATI	State O H	Zip Code 45211	M 0	D 4	Y 1 9 1 8	Amount 25.00	
Full Name of Contributor KAREN CASTRO					Registration Number, if PAC		
Street Address 3122 WESTWOOD NORTHERN		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CINCINNATI	State O H	Zip Code 45211	M 0	D 4	Y 1 9 1 8	Amount 25.00	
Full Name of Contributor RAMON LAINEZ					Registration Number, if PAC		
Street Address 3122 WESTWOOD NORTHERN		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CINCINNATI	State O H	Zip Code 45211	M 0	D 4	Y 1 9 1 8	Amount 25.00	
Full Name of Contributor ERICK LAINEZ					Registration Number, if PAC		
Street Address 3122 WESTWOOD NORTHERN		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CINCINNATI	State O H	Zip Code 45211	M 0	D 4	Y 1 9 1 8	Amount 25.00	
Full Name of Contributor DOMINIC CIOFFI					Registration Number, if PAC		
Street Address 337 GARWOOD CIR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City TALLMADGE	State O H	Zip Code 44278	M 0	D 4	Y 2 0 1 8	Amount 25.00	
Full Name of Contributor JARED SCARPINO					Registration Number, if PAC		
Street Address 750 SHIREDEN AVE NW		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CANAL FULTON	State O H	Zip Code 44614	M 0	D 4	Y 2 0 1 8	Amount 25.00	
Full Name of Contributor NATHAN CONNER					Registration Number, if PAC		
Street Address 1707 DELIA AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44320	M 0	D 4	Y 2 0 1 8	Amount 25.00	

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor						Registration Number, if PAC	
COLTON COLLAGE							
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
10325 WELLINGTON		Union Laborer			Cash		
City	State	Zip Code	M	D	Y	Amount	
STREETSBORO	O H	44241	0	4	2018	75.00✓	
Full Name of Contributor						Registration Number, if PAC	
RICHARD FETTY							
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
66 28TH STREET NW		Union Laborer			Cash		
City	State	Zip Code	M	D	Y	Amount	
BARBERTON	O H	44203	0	4	2018	75.00✓	
Full Name of Contributor						Registration Number, if PAC	
KENNETH BROOKS							
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
1604 HAMPTON ST		Union Laborer			Cash		
City	State	Zip Code	M	D	Y	Amount	
AKRON	O H	44305	0	4	2018	25.00✓	
Full Name of Contributor						Registration Number, if PAC	
ERICK BROWNING							
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
5871 MYERS RD		Union Laborer			Cash		
City	State	Zip Code	M	D	Y	Amount	
NEW FRANKLIN	O H	44319	0	4	2318	75.00✓	
Full Name of Contributor						Registration Number, if PAC	
DINERO BRANDON							
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
1363 WINHURST DR.		Union Laborer			Cash		
City	State	Zip Code	M	D	Y	Amount	
AKRON	O H	44313	0	4	2318	25.00✓	
Full Name of Contributor						Registration Number, if PAC	
ANTHONY CRISS							
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
361 LINCOLN AVE		Union Laborer			Cash		
City	State	Zip Code	M	D	Y	Amount	
CUYAHOGA FALLS	O H	44221	0	4	2418	75.00✓	
Full Name of Contributor						Registration Number, if PAC	
JOSE EVANGELISTA-MONDRAGON							
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
792 MCCAULEY RD		Union Laborer			Cash		
City	State	Zip Code	M	D	Y	Amount	
STOW	O H	44224	0	4	2518	75.00✓	
Full Name of Contributor						Registration Number, if PAC	
KEVIN CHARVILLE							
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
330 CENTER ST		Union Laborer			Cash		
City	State	Zip Code	M	D	Y	Amount	
HURON	O H	44839	0	4	2618	75.00✓	

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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 Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor BRYANT LEON					Registration Number, if PAC		
Street Address 316 HORTON AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44312	M 0	D 4	Y 2 6 1 8	Amount 25.00	
Full Name of Contributor VICTOR WITCHER					Registration Number, if PAC		
Street Address 1011 NOME AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44320	M 0	D 4	Y 2 7 1 8	Amount 75.00	
Full Name of Contributor FREEMAN VICKERS					Registration Number, if PAC		
Street Address 990 NOAH		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44320	M 0	D 4	Y 2 8 1 8	Amount 25.00	
Full Name of Contributor PIERRE MATTOCKS					Registration Number, if PAC		
Street Address 1814 WHYCHWOOD DR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44312	M 0	D 4	Y 2 7 1 8	Amount 25.00	
Full Name of Contributor GARY SNOW JR					Registration Number, if PAC		
Street Address 1285 HARPSTER AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44314	M 0	D 4	Y 2 8 1 8	Amount 75.00	
Full Name of Contributor CHRISTIAN WITHERSPOON					Registration Number, if PAC		
Street Address 732 VERNON ODOM		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44307	M 0	D 4	Y 3 0 1 7	Amount 25.00	
Full Name of Contributor TIMOTHY KEATON					Registration Number, if PAC		
Street Address 3194 DOUBLER		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44319	M 0	D 4	Y 3 0 1 8	Amount 25.00	
Full Name of Contributor THOMAS RAGER					Registration Number, if PAC		
Street Address 115 OLIN DR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City WOODSFIELD	State O H	Zip Code 43793	M 0	D 4	Y 3 0 1 8	Amount 25.00	

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Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor CLYDE FLOYD						Registration Number, if PAC	
Street Address 916 S. HAWKINS			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City AKRON	State O H	Zip Code 44320	M 0	D 4	Y 3 0 1 8	Amount 25.00	
Full Name of Contributor TODD TAYLOR						Registration Number, if PAC	
Street Address 3201 WEST 50TH STREET			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City CLEVELAND	State O H	Zip Code 44102	M 0	D 5	Y 0 1 1 8	Amount 75.00	
Full Name of Contributor DARREN EASTERLING						Registration Number, if PAC	
Street Address 923 OLD FORGE RD			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City KENT	State O H	Zip Code 44240	M 0	D 5	Y 0 1 1 8	Amount 25.00	
Full Name of Contributor MARIO JONES						Registration Number, if PAC	
Street Address 346 CLUSTER AVE			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City AKRON	State O H	Zip Code 44305	M 0	D 5	Y 0 1 1 8	Amount 25.00	
Full Name of Contributor CLAY HAWLEY						Registration Number, if PAC	
Street Address 584 INDUSTRY RD			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City ATWATER	State O H	Zip Code 44201	M 0	D 5	Y 0 1 1 8	Amount 25.00	
Full Name of Contributor RICHARD GIBSON III						Registration Number, if PAC	
Street Address 4004 RED WING TRAIL			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City STOW	State O H	Zip Code 44224	M 0	D 5	Y 0 2 1 8	Amount 25.00	
Full Name of Contributor BROCK BURZANKO						Registration Number, if PAC	
Street Address 15505 RIDER RD			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City BURTON	State O H	Zip Code 44021	M 0	D 5	Y 0 2 1 8	Amount 75.00	
Full Name of Contributor BRYAN SHIREY						Registration Number, if PAC	
Street Address 108 EVERGREEN DR			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City CRESTON	State O H	Zip Code 44217	M 0	D 5	Y 0 3 1 8	Amount 25.00	

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Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor MARK CLARK JR						Registration Number, if PAC	
Street Address 15492 PORTAGE ST			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City DOYLESTOWN		State O H	Zip Code 44230	M 0	D 5	Y 0 4 1 8	Amount 25.00
Full Name of Contributor SHAUN HERSHBERGER						Registration Number, if PAC	
Street Address 1073 MISHLER RD			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City MOGADORE		State O H	Zip Code 44260	M 0	D 5	Y 0 4 1 8	Amount 25.00
Full Name of Contributor ERIC MCCANTS						Registration Number, if PAC	
Street Address 928 STADELMAN			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City AKRON		State O H	Zip Code 44320	M 0	D 5	Y 0 4 1 8	Amount 25.00
Full Name of Contributor JESSICA STONE						Registration Number, if PAC	
Street Address 12718 DOYLETOWN RD			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City RITTMAN		State O H	Zip Code 44270	M 0	D 5	Y 0 4 1 8	Amount 75.00
Full Name of Contributor WILLIAM HOPKINS						Registration Number, if PAC	
Street Address 1505 PARKGATE AVE			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City AKRON		State O H	Zip Code 44313	M 0	D 5	Y 0 4 1 8	Amount 75.00
Full Name of Contributor KYLE KNIGHT						Registration Number, if PAC	
Street Address 2279 6TH STREET			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City CUYAHOGA FALLS		State O H	Zip Code 44221	M 0	D 5	Y 0 4 1 8	Amount 75.00
Full Name of Contributor JOHN DICKERSON						Registration Number, if PAC	
Street Address 406 LOOMIS AVE			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City CUYAHOGA FALLS		State O H	Zip Code 44221	M 0	D 5	Y 0 7 1 8	Amount 25.00
Full Name of Contributor DANWELL BARBER						Registration Number, if PAC	
Street Address 1106 PACKARD DR			Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash	
City AKRON		State O H	Zip Code 44320	M 0	D 5	Y 0 7 1 8	Amount 25.00

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Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor WILLIAM HAMM					Registration Number, if PAC		
Street Address 1338 ARCADIA RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City KENT	State O H	Zip Code 44240	M 0	D 5	Y 08	Amount 25.00 ✓	
Full Name of Contributor SALLY BROWN					Registration Number, if PAC		
Street Address 8786 NORWALK RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City LITCHFIELD	State O H	Zip Code 44253	M 0	D 5	Y 08	Amount 25.00 ✓	
Full Name of Contributor HARIS TSARTSABABALIDIS					Registration Number, if PAC		
Street Address 6238 SANDY RIDGE CIR NW		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City N. CANTON	State O H	Zip Code 44278	M 0	D 5	Y 08	Amount 25.00 ✓	
Full Name of Contributor STEVE HOFF					Registration Number, if PAC		
Street Address 699 JUNIOR AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44312	M 0	D 5	Y 10	Amount 75.00 ✓	
Full Name of Contributor JAMAR WALKER					Registration Number, if PAC		
Street Address 1202 CLIFTON AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44310	M 0	D 5	Y 11	Amount 25.00 ✓	
Full Name of Contributor CHRISTOPHER SLOAT					Registration Number, if PAC		
Street Address 522 NORTH ST		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City BROOKLYN HTS	State O H	Zip Code 44131	M 0	D 5	Y 11	Amount 75.00 ✓	
Full Name of Contributor MICHAEL MESHER					Registration Number, if PAC		
Street Address 514 STATE MILL RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44319	M 0	D 5	Y 14	Amount 75.00 ✓	
Full Name of Contributor JESSE CLARK					Registration Number, if PAC		
Street Address 2211 SCHNEIDER ST NW		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CANTON	State O H	Zip Code 44720	M 0	D 5	Y 14	Amount 75.00 ✓	

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Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor DANIEL BURKE					Registration Number, if PAC		
Street Address 100 GARDEN ST		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CRESTEN	State O H	Zip Code 44217	M 0	D 5	Y 1 5 1 8	Amount 25.00 ✓	
Full Name of Contributor JOCQUET TURNER					Registration Number, if PAC		
Street Address 825 WORK DR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44320	M 0	D 5	Y 1 5 1 8	Amount 75.00 ✓	
Full Name of Contributor VINCENT PESKO					Registration Number, if PAC		
Street Address 1558 MERRILL AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44306	M 0	D 5	Y 1 6 1 8	Amount 25.00 ✓	
Full Name of Contributor RYAN SYNK					Registration Number, if PAC		
Street Address 9728 WOOSTER PIKE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City SEVILLE	State O H	Zip Code 44273	M 0	D 5	Y 1 7 1 8	Amount 25.00 ✓	
Full Name of Contributor ANDRE DABNEY					Registration Number, if PAC		
Street Address 1329 ORRIN ST		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44320	M 0	D 5	Y 1 7 1 8	Amount 75.00 ✓	
Full Name of Contributor JOHN ALBERTONI					Registration Number, if PAC		
Street Address 2170 STEFFY RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City MOGADORE	State O H	Zip Code 44260	M 0	D 5	Y 1 8 1 8	Amount 75.00 ✓	
Full Name of Contributor DONALD GALLO					Registration Number, if PAC		
Street Address 37 4TH STREET NE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City NAVARRE	State O H	Zip Code 44662	M 0	D 5	Y 1 8 1 8	Amount 75.00 ✓	
Full Name of Contributor MICHAEL WILLIAMS					Registration Number, if PAC		
Street Address 702 NOME AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44320	M 0	D 5	Y 1 8 1 8	Amount 75.00 ✓	

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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)

Page Total \$ 450.00

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor CYNTHIA FORNEY					Registration Number, if PAC		
Street Address 2331 CHADWELL CIR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City UNIONTOWN	State O H	Zip Code 44685	M 0	D 5	Y 1 9 1 8	Amount 75.00 ✓	
Full Name of Contributor DERICK COON					Registration Number, if PAC		
Street Address 66 LAVERNE LN		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44312	M 0	D 5	Y 1 9 1 8	Amount 75.00 ✓	
Full Name of Contributor ANDREW SNYDER					Registration Number, if PAC		
Street Address 26 MARION		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City MOGADORE	State O H	Zip Code 44260	M 0	D 5	Y 2 1 1 8	Amount 75.00 ✓	
Full Name of Contributor SPENSER RICHARDSON					Registration Number, if PAC		
Street Address 1228 SARLSON AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44314	M 0	D 5	Y 2 2 1 8	Amount 75.00 ✓	
Full Name of Contributor KEVIN COFFEE					Registration Number, if PAC		
Street Address 128 W PROSPECT ST		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City WADSWORTH	State O H	Zip Code 44281	M 0	D 5	Y 2 3 1 8	Amount 25.00 ✓	
Full Name of Contributor BRIAN ALESTRI					Registration Number, if PAC		
Street Address 7940 TWINHILLS RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City STREESBORO	State O H	Zip Code 44241	M 0	D 5	Y 2 4 1 8	Amount 25.00 ✓	
Full Name of Contributor JOSHUA NEMETH					Registration Number, if PAC		
Street Address 1307 ADA AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44301	M 0	D 5	Y 2 4 1 8	Amount 25.00 ✓	
Full Name of Contributor JASON REEVES					Registration Number, if PAC		
Street Address 546 FENN RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City TALLMADGE	State O H	Zip Code 44278	M 0	D 5	Y 2 4 1 8	Amount 25.00 ✓	

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 Contributions Received

Prescribed by Secretary of State 2201

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor JEFFREY COLVIN					Registration Number, if PAC		
Street Address 1577 ADELMAN AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44320	M 0	D 5	Y 2	Y 4	Amount 75.00 ✓
Full Name of Contributor DEMONE PRYOR					Registration Number, if PAC		
Street Address 549 BROWN ST APT #3		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44311	M 0	D 5	Y 2	Y 5	Amount 75.00 ✓
Full Name of Contributor CODY SPARKS					Registration Number, if PAC		
Street Address 3554 ELMHURST CT		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City KENTO	State O H	Zip Code 44240	M 0	D 5	Y 2	Y 5	Amount 75.00 ✓
Full Name of Contributor ROBERT VALENTINE					Registration Number, if PAC		
Street Address 3336 W. 63RD STREET		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CLEVELAND	State O H	Zip Code 44102	M 0	D 5	Y 2	Y 5	Amount 25.00 ✓
Full Name of Contributor SEAN NEIDLINGER					Registration Number, if PAC		
Street Address 8711 EASTON ST		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City LOUISVILLE	State O H	Zip Code 44641	M 0	D 5	Y 2	Y 9	Amount 25.00 ✓
Full Name of Contributor SHAUN TOMPKINS					Registration Number, if PAC		
Street Address 414 LINCOLN AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City MOGADORE	State O H	Zip Code 44260	M 0	D 5	Y 2	Y 9	Amount 75.00 ✓
Full Name of Contributor GENE PHILLIPS					Registration Number, if PAC		
Street Address 947 PERRY AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City BARBERTON	State O H	Zip Code 44203	M 0	D 5	Y 3	Y 0	Amount 25.00 ✓
Full Name of Contributor ROBERT MARSDEN					Registration Number, if PAC		
Street Address 1802 CLEVELAND ST		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City SALEM	State O H	Zip Code 44460	M 0	D 5	Y 3	Y 0	Amount 25.00 ✓

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Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor CORY BUCKLEY					Registration Number, if PAC		
Street Address 1139 WINSTON ST		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44314	M 0	D 5	Y 3 0 1 8	Amount 75.00	
Full Name of Contributor MARK SLATES					Registration Number, if PAC		
Street Address 3215 GREENPARK ST NW		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City MASSILLON	State O H	Zip Code 44646	M 0	D 5	Y 3 1 1 8	Amount 25.00	
Full Name of Contributor STEVEN SKOCZEN					Registration Number, if PAC		
Street Address 1403 LORIMER DR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City PARMA	State O H	Zip Code 44134	M 0	D 5	Y 3 1 0 8	Amount 75.00	
Full Name of Contributor CODY WATTS					Registration Number, if PAC		
Street Address 1075 SPRINGDALE RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City STOW	State O H	Zip Code 44224	M 0	D 6	Y 0 1 1 8	Amount 75.00	
Full Name of Contributor JAMES TASKER					Registration Number, if PAC		
Street Address 1150 CONGRESS LAKE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City MOGADORE	State O H	Zip Code 44260	M 0	D 6	Y 0 1 1 8	Amount 25.00	
Full Name of Contributor JOSHUA BARTHOLOMEW					Registration Number, if PAC		
Street Address 6555 ROGER AVE NW		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City MASSILLON	State O H	Zip Code 44646	M 0	D 6	Y 0 1 1 8	Amount 75.00	
Full Name of Contributor EDWARD PRIDEMORE					Registration Number, if PAC		
Street Address 8022 ELM ST		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City GARRETTSVILLE	State O H	Zip Code 44231	M 0	D 6	Y 0 4 1 8	Amount 25.00	
Full Name of Contributor ZANE RABER					Registration Number, if PAC		
Street Address 27054 OAKWOOD DR, APT 107C		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City HOLMSTEAD TWP	State O H	Zip Code 44138	M 0	D 6	Y 0 4 1 8	Amount 25.00	

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Page Total \$ 400.00

Statement of Contributions Received

Prescribed by Secretary of State 201

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor SETH CARTER					Registration Number, if PAC		
Street Address 90 WHITE HALL DR.		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City TALLMADGE	State O H	Zip Code 44278	M 0	D 6	Y 0 4 1 8	Amount 75.00 ✓	
Full Name of Contributor STEVEN STRANAN					Registration Number, if PAC		
Street Address 1708 LIBERTY DR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44313	M 0	D 6	Y 0 4 1 8	Amount 25.00 ✓	
Full Name of Contributor ANTHONY WILCOX					Registration Number, if PAC		
Street Address 1620 SIMCOE AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44305	M 0	D 6	Y 0 4 1 8	Amount 25.00 ✓	
Full Name of Contributor ZACHARIAH THORNTON					Registration Number, if PAC		
Street Address 1076 PALMETTO AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44306	M 0	D 6	Y 0 4 1 8	Amount 25.00 ✓	
Full Name of Contributor MATTHEW BLOSSER					Registration Number, if PAC		
Street Address 779 EASTOWNE DR, APT 903		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City RAVENNA	State O H	Zip Code 44266	M 0	D 6	Y 0 5 1 8	Amount 75.00 ✓	
Full Name of Contributor SETH LANTZ					Registration Number, if PAC		
Street Address 4199 MASSILLON RD, LOT 33		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City UNIONTOWN	State O H	Zip Code 44685	M 0	D 6	Y 0 5 1 8	Amount 25.00 ✓	
Full Name of Contributor DENNIS BARTRAM					Registration Number, if PAC		
Street Address 255 WESTVIEW AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City WADSWORTH	State O H	Zip Code 44281	M 0	D 6	Y 0 5 1 8	Amount 25.00 ✓	
Full Name of Contributor AUSTIN DONOVAN					Registration Number, if PAC		
Street Address 2931 PIKES AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44314	M 0	D 6	Y 0 5 1 8	Amount 75.00 ✓	

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Page Total \$ 350.00

Statement of Contributions Received

Prescribed by Secretary of State 201

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor STEFAN KOVACEVICH					Registration Number, if PAC		
Street Address 1035 HEMLOCK HILLS DR, APT D		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44313	M 0	D 6	Y 0	Amount 25.00 ✓	
Full Name of Contributor TIMOTHY TRINER					Registration Number, if PAC		
Street Address 1821 KORAN AVE NW		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CANTON	State O H	Zip Code 44708	M 0	D 6	Y 0	Amount 75.00 ✓	
Full Name of Contributor JOSEPH AEMMER					Registration Number, if PAC		
Street Address 1855 KRUMROY RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44312	M 0	D 6	Y 0	Amount 25.00 ✓	
Full Name of Contributor DERRICK HENDERSON					Registration Number, if PAC		
Street Address 1109 FREDERICK BLVD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44320	M 0	D 6	Y 0	Amount 25.00 ✓	
Full Name of Contributor AARON MITCHELL					Registration Number, if PAC		
Street Address 287 WILBUR DR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City N. CANTON	State O H	Zip Code 44720	M 0	D 6	Y 0	Amount 75.00 ✓	
Full Name of Contributor SCOTT BEATTY JR					Registration Number, if PAC		
Street Address 5900 HANCOCK ST SW		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City CANTON	State O H	Zip Code 44706	M 0	D 6	Y 0	Amount 75.00 ✓	
Full Name of Contributor JAMES LICHTENSTIGER					Registration Number, if PAC		
Street Address 415 MCGOWAN ST		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44306	M 0	D 6	Y 0	Amount 75.00 ✓	
Full Name of Contributor NICHOLAS CARRIERO					Registration Number, if PAC		
Street Address 9813 ROYAL VALLEY DR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City N. ROYALTON	State O H	Zip Code 44133	M 0	D 6	Y 0	Amount 75.00 ✓	

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Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Laborers' Local Union #894 PAC Fund, #LA236							
Full Name of Contributor CARRINGTON CHATMAN					Registration Number, if PAC		
Street Address 1417 ORCHARDVIEW DR		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City COPLEY	State O H	Zip Code 44321	M 0	D 6	Y 0 8 1 8	Amount 75.00 ✓	
Full Name of Contributor JONATHAN HAFER					Registration Number, if PAC		
Street Address 3709 BROADVIEW RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City RICHFIELD	State O H	Zip Code 44286	M 0	D 6	Y 0 8 1 8	Amount 25.00 ✓	
Full Name of Contributor MARK DEYLING					Registration Number, if PAC		
Street Address 7821 GUILFORD RD		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City SEVILLE	State O H	Zip Code 44273	M 0	D 6	Y 0 8 1 8	Amount 25.00 ✓	
Full Name of Contributor AARON CONNER					Registration Number, if PAC		
Street Address 1707 DELIA AVE		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City AKRON	State O H	Zip Code 44320	M 0	D 6	Y 0 8 1 8	Amount 25.00 ✓	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization Union Laborer			Form (Cash, Check, etc.) Cash		
City	State	Zip Code	M	D	Y	Amount	

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Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Laborers' Local Union #894 PAC Fund, LA236			
To Whom Paid Federated Democratic Women		Date (MM/DD/YYYY) 05/14/2018	Amount 180.00
Street Address 3960 Summit Road		Purpose Contribution	
City Ravenna	State OH	Zip Code 44266	Check Number 2106
To Whom Paid Friends of Steve Barry for Sheriff		Date (MM/DD/YYYY) 05/14/2018	Amount 600.00
Street Address 4847 Manchester Rd.		Purpose Contribution	
City Akron	State OH	Zip Code 44319	Check Number 2107
To Whom Paid Paula Prentice Committee		Date (MM/DD/YYYY) 05/14/2018	Amount 500.00
Street Address 4235 Aldawood Hills Dr.		Purpose Contribution	
City Akron	State OH	Zip Code 44319	Check Number 2108
To Whom Paid Elect Ilene Shapiro		Date (MM/DD/YYYY) 05/14/2018	Amount 250.00
Street Address 1188 Shadyside Lane		Purpose Contribution	
City Tallmadge	State OH	Zip Code 44278	Check Number 2109
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ _____