

2410 BTB

JON HUSTED
Ohio Secretary of State



AKRON, OHIO

Ohio Campaign Finance Report

Form 30-A

ORC 3517.10

2018 JUL 31 AM 11:54

Committee Name Akron Citizens For Safety And Service		Office Sought		District
Street Address 784 Hampton Ridge		City Akron	State OH	Zip 44313
Candidate Name OR PAC Registration Number		Treasurer Name Cheri Cunningham		Election Date (MM/DD/YYYY)
Type of Report (choose one): <input type="checkbox"/> Annual <input checked="" 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				
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.

Year
2018

1. Amount brought forward from last report	\$44,937.15
2. Total monetary contributions (From Forms 31-A and 31-E)	\$5411.77
3. Total other income (From Form 31-A-2)	
4. Total funds available (sum of lines 1, 2, 3)	\$50,348.92
5. Total monetary expenditures (From Forms 31-B and 31-F)	\$138
6. Balance on hand (line 4 minus line 5)	\$50,210.92
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**

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

Cheri Cunningham
Signature of Treasurer or Deputy Treasurer

07/31/2018
Date (MM/DD/YYYY)

Contribution Pages
1

Expenditure Pages
2

Other Pages

Total Pages



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Akron Citizens For Safety And Service				
Full Name of Contributor Citizens to Keep Akron Strong			Registration Number, if PAC	
Street Address 684 Hampton Ridge		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Akron	State OH	Zip Code 44313	Date (MM/DD/YYYY) 03/12/2018	Amount \$5411.77
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	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 OH	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 OH	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 OH	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 OH	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

Full Name of Committee Akron Citizens For Safety And Service			
To Whom Paid Key Bank		Date (MM/DD/YYYY) 12/29/2017	Amount \$3
Street Address 219 S Main St		Purpose bank fee	
City Akron	State OH	Zip Code 44308	Check Number
To Whom Paid Key Bank		Date (MM/DD/YYYY) 01/31/2018	Amount \$3
Street Address 219 S Main St		Purpose bank fee	
City Akron	State OH	Zip Code 44308	Check Number
To Whom Paid Key Bank		Date (MM/DD/YYYY) 02/28/2018	Amount \$3
Street Address 219 S Main St		Purpose bank fee	
City Akron	State OH	Zip Code 44308	Check Number
To Whom Paid Key Bank		Date (MM/DD/YYYY) 03/30/2018	Amount \$3
Street Address 219 S Main St		Purpose bank fee	
City Akron	State OH	Zip Code 44308	Check Number
To Whom Paid Key Bank		Date (MM/DD/YYYY) 04/30/2018	Amount \$3
Street Address 219 S Main St		Purpose bank fee	
City Akron	State OH	Zip Code 44308	Check Number

Page Total \$ 15



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Akron Citizens For Safety And Service			
To Whom Paid Department of Treasury		Date (MM/DD/YYYY) 01/10/2018	Amount \$50
Street Address PO Box 2508		Purpose registration fee	
City Cincinnati	State OH	Zip Code 45021	Check Number
To Whom Paid Amanda Adey		Date (MM/DD/YYYY) 03/19/2018	Amount \$73
Street Address 2241 Ross Drive		Purpose reimbursed web fees	
City Stow	State OH	Zip Code 44224	Check Number 1073
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 \$ 123