



Committee Name <i>Amy Corrigan Jones for Judge Common Pleas July</i>		Office Sought <i>Common Pleas July</i>		District
Street Address <i>137 S. Main Street</i>		City <i>Abon</i>	State <i>OH</i>	Zip <i>44308</i>
Candidate Name OR PAC Registration Number <i>Amy Corrigan Jones</i>		Treasurer Name <i>Erik W. Jones</i>		Election Date (MM/DD/YYYY) <i>11/06/2018</i>
Type of Report (choose one): <input type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Post-Primary <input checked="" 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>\$ 8,738.93</i>
2. Total monetary contributions (From Forms 31-A and 31-E)	<i>\$ 921.00</i>
3. Total other income (From Form 31-A-2)	<i>\$ 00.00</i>
4. Total funds available (sum of lines 1, 2, 3)	<i>\$ 9,659.93</i>
5. Total monetary expenditures (From Forms 31-B and 31-F)	<i>\$ 10.82</i>
6. Balance on hand (line 4 minus line 5)	<i>\$ 9,649.11</i>
7. Value of in-kind contributions received (From Form 31-J-1)	<i>\$ 00.00</i>
8. Value of in-kind contributions made (From Form 31-J-2)	<i>\$ 00.00</i>
9. Outstanding loans owed by committee (From Form 31-C)	<i>\$ 23,000.00</i>
10. Outstanding debts owed by committee (From Form 31-N)	<i>\$ 16,523.78</i>
11. Outstanding loans owed to committee (From Form 31-K)	<i>\$ 00.00</i>
12. Value of independent expenditures made (From Form 31-U)	<i>\$ 00.00</i>

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SUMMIT COUNTY  
BOARD OF ELECTIONS

2018 OCT 25 AM 11:31  
ABRON, OH

# 2524 89

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

*[Signature]*  
Signature of Treasurer or Deputy Treasurer

*10/24/18*  
Date (MM/DD/YYYY)

Contribution Pages <i>2</i>	Expenditure Pages <i>1</i>	Other Pages <i>3</i>	Total Pages <i>7</i>
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**Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee <i>Amy Corrigan Jones For Judge</i>				
Full Name of Contributor <i>Catherine Corrigan</i>			Registration Number, if PAC	
Street Address <i>2891 Elmwood</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Pay Roll</i>
City <i>Cuyahoga Falls</i>	State <i>OH</i>	Zip Code <i>44221</i>	Date (MM/DD/YYYY) <i>8/24/18</i>	Amount <i>\$1.00</i>
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State <i>OH</i>	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 <i>OH</i>	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 <i>OH</i>	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 <i>OH</i>	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>			
<b>To Whom Paid</b> Pay Pal		<b>Date (MM/DD/YYYY)</b> 8/24/18	<b>Amount</b> \$10.82
<b>Street Address</b> 2211 North 1 <sup>st</sup> Street		<b>Purpose</b> Processing Fee	
<b>City</b> San Jose	<b>State</b> CA	<b>Zip Code</b> 94088	<b>Check Number</b> electronic
<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 \$ 10.82



**Statement of Loans Received**

Form 31-C

R.C. 3517.10

Full Name of Committee <i>Amy Carrigall Jones for Judge</i>					
From Whom Received <i>James Carrigall</i>				Prior Amount <i>\$20,000.00</i>	Amt. Incurred this Period <i>\$ 00.00</i>
Street Address <i>500 Hampshire</i>				Outstanding Balance <i>\$20,000.00</i>	
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44313</i>	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)	Amount	
Registration Number, if PAC	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount	
Employer/Occupation/Labor Organization*	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount	
From Whom Received <i>Amy Carrigall Jones</i>				Prior Amount <i>\$3,000.00</i>	Amt. Incurred this Period <i>\$ 00.00</i>
Street Address <i>500 Hampshire</i>				Outstanding Balance <i>\$3,000.00</i>	
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44313</i>	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)	Amount	
Registration Number, if PAC	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/DD/YYYY)	Amount	
Employer/Occupation/Labor Organization*	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (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)]

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 \$ 23,000.00

Total Received This Period \$ 00.00 (also record on Form 31-A-2)

Total Payments Received this Period \$ 00.00 (also record on Form 31-B)

Total Outstanding Balance \$ 23,000.00 (also record on Form 30-A)



**Statement of Outstanding Debts**

Form 31-N  
R.C. 3517.10

Full Name of Committee <i>Amy Carrigall Jones for Judge</i>			
To Whom Owed <i>ERIC Jones</i>		Prior Amount <i>\$2,376.60</i>	Amount Incurred this Period <i>00.00</i>
Street Address <i>100 Hampshire</i>		Item or Purpose of Debt <i>Website Printer</i>	Outstanding Balance <i>\$2,376.60</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44313</i>	Payments This Period
Date Debt was Originally Incurred (MM/DD/YYYY)		Date of Payment (MM/DD/YYYY)	
Registration Number, if PAC		Date of Payment (MM/DD/YYYY)	Amount
Registration Number, if PAC		Date of Payment (MM/DD/YYYY)	Amount
To Whom Owed <i>Amy Carrigall Jones</i>		Prior Amount <i>\$1,958.64</i>	Amount Incurred this Period <i>00.00</i>
Street Address <i>500 Hampshire</i>		Item or Purpose of Debt <i>Postage, etc.</i>	Outstanding Balance <i>\$1,958.64</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44313</i>	Payments This Period
Date Debt was Originally Incurred (MM/DD/YYYY)		Date of Payment (MM/DD/YYYY)	
Registration Number, if PAC		Date of Payment (MM/DD/YYYY)	Amount
Registration Number, if PAC		Date of Payment (MM/DD/YYYY)	Amount

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.

Total Payments This Period \$ 00.00 (also record on Form 31-B)

Total Outstanding Balance \$ 16,525.38 (also record on cover page)



**Statement of Outstanding Debts**

Form 31-N  
R.C. 3517.10

Full Name of Committee <i>Amy Corrigan Sons for Judge</i>			
To Whom Owed <i>James Corrigan</i>		Prior Amount <i>\$12,188.14</i>	Amount Incurred this Period <i>00.00</i>
Street Address <i>500 Hampshire</i>		Item or Purpose of Debt <i>Signs/mailings</i>	Outstanding Balance <i>\$12,188.14</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44266</i>	Payments This Period
Date Debt was Originally Incurred (MM/DD/YYYY)		Date of Payment (MM/DD/YYYY)	Amount
Registration Number, if PAC		Date of Payment (MM/DD/YYYY)	Amount
Date Debt was Originally Incurred (MM/DD/YYYY)		Date of Payment (MM/DD/YYYY)	Amount
To Whom Owed		Prior Amount	Amount Incurred this Period
Street Address		Item or Purpose of Debt	Outstanding Balance
City	State	Zip Code	Payments This Period
Date Debt was Originally Incurred (MM/DD/YYYY)		Date of Payment (MM/DD/YYYY)	Amount
Registration Number, if PAC		Date of Payment (MM/DD/YYYY)	Amount
Date Debt was Originally Incurred (MM/DD/YYYY)		Date of Payment (MM/DD/YYYY)	Amount

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.

Total Payments This Period \$ 00.00 (also record on Form 31-B)

Total Outstanding Balance \$ 16,523.38 (also record on cover page)