



Committee Name <i>Committee To Elect John Pribonic</i>		Office Sought <i>Stow Mayor</i>		District
Street Address <i>4210 Cheval Circle</i>		City <i>Stow</i>	State <i>OH</i>	Zip <i>44224</i>
Candidate Name OR PAC Registration Number <i>John D. Pribonic</i>		Treasurer Name <i>Cynthia Pribonic</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 <i>2018</i>
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>\$4,561.33</i>
2. Total monetary contributions (From Forms 31-A and 31-E)	<i>\$1,325.00</i>
3. Total other income (From Form 31-A-2)	<i>—</i>
4. Total funds available (sum of lines 1, 2, 3)	<i>\$5,886.33</i>
5. Total monetary expenditures (From Forms 31-B and 31-F)	<i>\$792.89</i>
6. Balance on hand (line 4 minus line 5)	<i>\$5,093.44</i>
7. Value of in-kind contributions received (From Form 31-J-1)	<i>—</i>
8. Value of in-kind contributions made (From Form 31-J-2)	<i>—</i>
9. Outstanding loans owed by committee (From Form 31-C)	<i>\$5,500.00</i>
10. Outstanding debts owed by committee (From Form 31-N)	<i>—</i>
11. Outstanding loans owed to committee (From Form 31-K)	<i>—</i>
12. Value of independent expenditures made (From Form 31-U)	<i>—</i>

SUBJECT 23 AM10:52
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 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.**

Cynthia Pribonic Treasurer
 Signature of Treasurer or Deputy Treasurer

10/21/2018
 Date (MM/DD/YYYY)

Contribution Pages <i>1</i>	Expenditure Pages <i>1</i>	Other Pages <i>13</i>	Total Pages <i>15</i>
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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Committee To Elect John Pribonic				
Full Name of Contributor Karen E Monbeck			Registration Number, if PAC	
Street Address 5171 Bramble Creek Trail		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Stow	State OH	Zip Code 44224	Date (MM/DD/YYYY) 07/06/2018	Amount \$ 100 -
Full Name of Contributor Jean Jonstein			Registration Number, if PAC	
Street Address 3412 Oak Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Stow	State OH	Zip Code 44224	Date (MM/DD/YYYY) 07/08/2018	Amount \$ 25 -
Full Name of Contributor Julie Gedeon			Registration Number, if PAC	
Street Address 2369 Harvester Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Stow	State OH	Zip Code 44224	Date (MM/DD/YYYY) 08/10/2018	Amount \$ 100 -
Full Name of Contributor Realtors Political Action Committee / Ohio			Registration Number, if PAC CP-401	
Street Address 200 E Town Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 08/20/2018	Amount \$ 1000 -
Full Name of Contributor Leo Porter			Registration Number, if PAC	
Street Address P.O. Box 2175		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Stow	State OH	Zip Code 44224	Date (MM/DD/YYYY) 10/03/2018	Amount \$ 100 -

*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)]

Page Total **\$ 1325 -**



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Committee To Elect John Pribonic			
To Whom Paid Citizens Bank		Date (MM/DD/YYYY) 07/31/2018	Amount \$ 2.00
Street Address 3323 Kent Road		Purpose Banking Expense	
City Stow	State OH	Zip Code 44224	Check Number EFT
To Whom Paid Citizens Bank		Date (MM/DD/YYYY) 08/31/2018	Amount \$ 2.00
Street Address 3323 Kent Road		Purpose Banking Expense	
City Stow	State OH	Zip Code 44224	Check Number EFT
To Whom Paid SMF Band Parents Assoc		Date (MM/DD/YYYY) 08/31/2018	Amount \$ 75-
Street Address P.O. Box 2454		Purpose Band Show Ad	
City Stow	State OH	Zip Code 44224	Check Number 1012
To Whom Paid Consolidus		Date (MM/DD/YYYY) 09/14/2018	Amount \$ 711.89
Street Address 526 South Main Street		Purpose Yard Signs	
City Akron	State OH	Zip Code 44311-4401	Check Number 1013
To Whom Paid Citizens Bank		Date (MM/DD/YYYY) 09/28/2018	Amount \$ 2.00
Street Address 3323 Kent Road		Purpose Banking Expense	
City Stow	State OH	Zip Code 44224	Check Number EFT

Page Total \$ 792.89



Statement of Loans Received

Form 31-C

R.C. 3517.10

Full Name of Committee Committee To Elect John Pribonic					
From Whom Received John D. Pribonic				Prior Amount \$5500-	Amt. Incurred this Period
Street Address 4210 Cheval Circle					Outstanding Balance \$5500-
City Stow	State OH	Zip Code 44224	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				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)	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	

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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).

Total Prior Amount \$ \$5500.00

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 \$ \$5500.00 (also record on Form 30-A)