



Committee Name STOW REPUBLICAN CLUB		Office Sought		District
Street Address 1316 RITCHIE RD		City STOW	State OH	Zip 44224
Candidate Name OR PAC Registration Number		Treasurer Name RODNEY G. ARMSTRONG, JR.		Election Date (MM/DD/YYYY) 11/06/2018
<b>Type of Report (choose one):</b> <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 2018
<b>Amended Report</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<b>Termination</b> <input type="checkbox"/> Check this box if the committee wishes to terminate with this report		<b>Short Form Report (R.C. 3517.10(H))</b> <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	2,366.06
2. Total monetary contributions (From Forms 31-A and 31-E)	350.00
3. Total other income (From Form 31-A-2)	0
4. Total funds available (sum of lines 1, 2, 3)	2,716.06
5. Total monetary expenditures (From Forms 31-B and 31-F)	800.00
6. Balance on hand (line 4 minus line 5)	1916.06
7. Value of in-kind contributions received (From Form 31-J-1)	0
8. Value of in-kind contributions made (From Form 31-J-2)	0
9. Outstanding loans owed by committee (From Form 31-C)	0
10. Outstanding debts owed by committee (From Form 31-N)	0
11. Outstanding loans owed to committee (From Form 31-K)	0
12. Value of independent expenditures made (From Form 31-U)	0

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SUMMIT COUNTY  
BOARD OF ELECTIONS

2018 OCT 22 PM 2:17  
 SUMMIT COUNTY  
 BOARD OF ELECTIONS  
 AKRON, OHIO

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

*Rodney G. Armstrong, Jr.*  
Signature of Treasurer or Deputy Treasurer

10/22/2018  
Date (MM/DD/YYYY)

Contribution Pages  
2

Expenditure Pages  
1

Other Pages  
1

Total Pages  
4



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee STOW REPUBLICAN CLUB				
Full Name of Contributor <i>Kenneth Spahr</i>			Registration Number, if PAC	
Street Address <i>3700 Buckworth CT</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>CASH</i>
City <i>STow</i>	State OH	Zip Code <i>44224</i>	Date (MM/DD/YYYY) <i>8/20/18</i>	Amount <i>20.00</i>
Full Name of Contributor <i>Debbie Walsh</i>			Registration Number, if PAC	
Street Address <i>38 KUDER Ave</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>CASH</i>
City <i>AKron</i>	State OH	Zip Code <i>44303</i>	Date (MM/DD/YYYY) <i>8/20/18</i>	Amount <i>15.00</i>
Full Name of Contributor <i>Nancy Krott</i>			Registration Number, if PAC	
Street Address <i>1783 Ritchie Rd</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>CASH</i>
City <i>STow</i>	State OH	Zip Code <i>44224</i>	Date (MM/DD/YYYY) <i>8/20/18</i>	Amount <i>5.00</i>
Full Name of Contributor <i>Debra Costa</i>			Registration Number, if PAC	
Street Address <i>1876 Higby</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>CASH</i>
City <i>STow</i>	State OH	Zip Code <i>44224</i>	Date (MM/DD/YYYY) <i>8/20/18</i>	Amount <i>15.00</i>
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 Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee STOW REPUBLICAN CLUB				
Full Name of Contributor <i>Susan Truby</i>			Registration Number, if PAC	
Street Address <i>2976 Devan Vale Dr.</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Cuyahoga Falls</i>	State OH	Zip Code <i>44223</i>	Date (MM/DD/YYYY) <i>9/26/18</i>	Amount <i>100.<sup>00</sup></i>
Full Name of Contributor <i>Cecilia Robert</i>			Registration Number, if PAC	
Street Address <i>1745 Calvert Dr.</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Cuyahoga Falls</i>	State OH	Zip Code <i>44223</i>	Date (MM/DD/YYYY) <i>9/26/18</i>	Amount <i>100.<sup>00</sup></i>
Full Name of Contributor <i>Melissa Wilkinson</i>			Registration Number, if PAC	
Street Address <i>2461 Theiss Rd.</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City <i>Cuyahoga Falls</i>	State OH	Zip Code <i>44223</i>	Date (MM/DD/YYYY) <i>9/26/18</i>	Amount <i>50.<sup>00</sup></i>
Full Name of Contributor <i>Ardith Friend</i>			Registration Number, if PAC	
Street Address <i>2322 Richmond Rd</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Cuyahoga Falls</i>	State OH	Zip Code <i>44221</i>	Date (MM/DD/YYYY) <i>9/26/18</i>	Amount <i>10.<sup>00</sup></i>
Full Name of Contributor <i>Edward Stewart</i>			Registration Number, if PAC	
Street Address <i>702 Eleanor Dr.</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>CASH</i>
City <i>Cuyahoga Falls</i>	State OH	Zip Code <i>44223</i>	Date (MM/DD/YYYY) <i>9/26/18</i>	Amount <i>35.<sup>00</sup></i>

\*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> STOW REPUBLICAN CLUB			
To Whom Paid SHERATON SUITES		Date (MM/DD/YYYY) 10/15/2018	Amount \$ 800.00
Street Address 1989 FRONT STREET		Purpose MEETING, FOOD AND DRINK FOR CANDIDATES RALLY	
City CUYAHOGA FALLS	State OH	Zip Code 44221	Check Number 401
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
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 800.00