



Committee Name <i>Federated Democratic Women of Summit Co.</i>		Office Sought		District
Street Address <i>100 Rhodes Ave.</i>		City <i>Akron</i>	State <i>OH</i>	Zip <i>44302</i>
Candidate Name OR PAC Registration Number		Treasurer Name <i>Janie Foshee</i>		Election Date (MM/DD/YYYY) <i>11-6-2018</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 type="checkbox"/> Pre-General <input checked="" 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>4816.60</i>
2. Total monetary contributions (From Forms 31-A and 31-E)	<i>35.00</i>
3. Total other income (From Form 31-A-2)	—
4. Total funds available (sum of lines 1, 2, 3)	<i>4851.60</i>
5. Total monetary expenditures (From Forms 31-B and 31-F)	—
6. Balance on hand (line 4 minus line 5)	<i>4851.60</i>
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

2018 DEC 10 AM 8:13

SUMMIT COUNTY
 BOARD OF ELECTIONS
 AKRON OHIO 44331

2551 DF

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

Janie Foshee

Signature of Treasurer or Deputy Treasurer

12-10-2018

Date (MM/DD/YYYY)

Contribution Pages
1

Expenditure Pages
0

Other Pages
1

Total Pages
2



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee <i>Federated Democratic Women Eleanor Roosevelt Luncheon - of Summit County</i>				
Full Name of Contributor <i>Sabrina Woodson</i>			Registration Number, if PAC	
Street Address <i>1796 Treetop Trail</i>		Employer/Occupation/Labor Organization*		Form (Cash, <u>Check</u> , etc.) <i>1100</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44313</i>	Date (MM/DD/YYYY) <i>11-5-2018</i>	Amount <i>35.00</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)]