



Committee Name <b>SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - JUDICIAL</b>		Office Sought		District
Street Address <b>438 GRANT ST.</b>		City <b>AKRON</b>	State <b>OH</b>	Zip <b>44311</b>
Candidate Name OR PAC Registration Number		Treasurer Name <b>CHRISTOPHER B. GRIMM</b>		Election Date (MM/DD/YYYY) <b>11/06/2018</b>

**Type of Report** (choose one):

Annual
  Semiannual
  Pre-Primary
  Post-Primary
  Pre-General
  Post-General

Statewide Candidates Only:

July Monthly
  August Monthly
  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.
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<b>1. Amount brought forward from last report</b>	7,466.79
<b>2. Total monetary contributions</b> (From Forms 31-A and 31-E)	69,900.00
<b>3. Total other income</b> (From Form 31-A-2)	25,000.00
<b>4. Total funds available</b> (sum of lines 1, 2, 3)	94,900.00
<b>5. Total monetary expenditures</b> (From Forms 31-B and 31-F)	91,245.92
<b>6. Balance on hand</b> (line 4 minus line 5)	11,120.87
<b>7. Value of in-kind contributions received</b> (From Form 31-J-1)	640.00
<b>8. Value of in-kind contributions made</b> (From Form 31-J-2)	
<b>9. Outstanding loans owed by committee</b> (From Form 31-C)	69,500.00
<b>10. Outstanding debts owed by committee</b> (From Form 31-N)	
<b>11. Outstanding loans owed to committee</b> (From Form 31-K)	
<b>12. Value of independent expenditures made</b> (From Form 31-U)	

OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS

2018 DEC 13 PM 3:38

SUMMIT COUNTY  
BOARD OF ELECTIONS  
AKRON OHIO 44311  
#2474

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

  
Signature of Treasurer or Deputy Treasurer

12/12/2018  
Date (MM/DD/YYYY)

Contribution Pages  
**2**

Expenditure Pages  
**3**

Other Pages  
**3**

Total Pages  
**8**

P, 2

SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - JUDICIAL  
Substitute form 31a

18-Oct	Kisling , Nestico & Redick, LLC, LPA	Check	\$ 15,000.00
18-Oct	Kathy House	Check	\$ 100.00
18-Oct	McLaughlin for Judge	Check	\$ 7,000.00
18-Oct	Charles Flagg	Check	\$ 100.00
22-Oct	McLaughlin for Judge	Check	\$ 7,000.00
13-Oct	Jeffrey Fusco	Check	\$ 100.00
16-Oct	Federated Democratic Women of Summit County PAC #	Check	\$ 1,500.00
25-Oct	Thomas Bevan	Check	\$ 5,000.00
29-Oct	Benesch, Friedman, Copeland & Aronoff LLP	Check	\$ 1,000.00
31-Oct	Bevan & Associate LPA, INC.	Check	\$ 25,000.00
18-Oct	Sheet Metal Workers Political Action League LU#33	Check	\$ 2,500.00
5-Nov	Brubaker for Engineer	Check	\$ 500.00
6-Nov	Marcia Fudge for Congress	Check	\$ 5,000.00
5-Nov	Jerry Feeman	Check	\$ 100.00

\$ 69,900.00



**Statement of Other Income**

Form 31-A-2

R.C. 3517.10(B)

<b>Full Name of Committee</b> SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - JUDICIAL			
<b>Full Name of Contributor</b> LOANS RECEIVED THIS PERIOD		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b> \$25,000.00
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>

\* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - JUDICIAL			
To Whom Paid BURGES & BURGES STRATEGIST		Date (MM/DD/YYYY) 10/18/2018	Amount \$1,749.00
Street Address 26100 LAKE SHORE BLVD.		Purpose PROFESIONAL SERVICES	
City CLEVELAND	State OH	Zip Code 44132	Check Number 793
To Whom Paid OHIO DEMOCRATIC PARTY		Date (MM/DD/YYYY) 10/18/2018	Amount \$5,850.00
Street Address 340 E. FULTON ST		Purpose DONATION	
City COLUMBUS	State OH	Zip Code 43215	Check Number 794
To Whom Paid OHIO DEMOCRATIC PARTY		Date (MM/DD/YYYY) 10/18/2018	Amount \$7,000.00
Street Address		Purpose DONATION	
City	State OH	Zip Code	Check Number 795
To Whom Paid OHIO DEMOCRATIC PARTY		Date (MM/DD/YYYY) 10/22/2018	Amount \$7,000.00
Street Address		Purpose DONATION	
City	State OH	Zip Code	Check Number 796
To Whom Paid OHIO DEMOCRATIC PARTY		Date (MM/DD/YYYY) 10/26/2018	Amount \$17,600.00
Street Address		Purpose DONATION	
City	State OH	Zip Code	Check Number 797

Page Total \$ 39,199<sup>00</sup>



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - JUDICIAL			
To Whom Paid BURGES & BURGES STRATEGIST		Date (MM/DD/YYYY) 10/31/2018	Amount \$22,820.00
Street Address 26100 LAKESHORE BLVD.		Purpose MEDIA BUY	
City CLEVELAND	State OH	Zip Code 44132	Check Number 798
To Whom Paid CROMWEL AND CO.		Date (MM/DD/YYYY) 10/31/2018	Amount \$3,253.28
Street Address 4 ALCAP RIDGE		Purpose PRINTING	
City CROMWELL	State CT	Zip Code 06416	Check Number 799
To Whom Paid BURGES & BURGES		Date (MM/DD/YYYY) 11/02/2018	Amount \$1,839.00
Street Address		Purpose PROFESSIONAL SERVICES	
City	State OH	Zip Code	Check Number 800
To Whom Paid FELITA GRICE		Date (MM/DD/YYYY) 11/02/2018	Amount \$ 174.32
Street Address 438 GRANT ST.		Purpose REIMBBURSE FOR POLING BAGS	
City AKRON	State OH	Zip Code 44311	Check Number 801
To Whom Paid ENTERTAINMENT MEDIA CONSULTANT		Date (MM/DD/YYYY) 11/04/2018	Amount \$1,500.00
Street Address 1152 HERMAN ST.		Purpose SOUND SYSTEM	
City AKRON	State OH	Zip Code 44307	Check Number 802

Page Total \$ 29,586.60



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - JUDICIAL			
To Whom Paid BURGES & BURGES STRATEGIST		Date (MM/DD/YYYY) 11/09/2018	Amount \$9,460.32
Street Address 26100 LAKE SHORE BLVD		Purpose GOTV PHONE CALLS	
City CLEVELAND	State OH	Zip Code 44132	Check Number 803
To Whom Paid SASSY DOG		Date (MM/DD/YYYY) 11/13/2018	Amount \$ 500.00
Street Address 428 5TH ST.		Purpose GOTV FOOD	
City BARBERTON	State OH	Zip Code 44203	Check Number 804
To Whom Paid BURGES & BURGES STRATEGIST		Date (MM/DD/YYYY) 11/27/2018	Amount \$12,500.00
Street Address		Purpose PRINTING	
City	State OH	Zip Code	Check Number 805
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 \$ 22,460<sup>32</sup>



**In-Kind Contributions Received**

Form 31-J-1  
R.C. 3517.10

<b>Full Name of Committee</b> SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - JUDICIAL				
<b>Full Name of Contributor</b> THOMAS BEVAN		<b>Employer, Occupation, Labor Organization*</b> ATTORNEY		<b>Registration Number, if PAC</b>
<b>Street Address</b> 530 MEADOWRIDGE		<b>Description of Item or Service</b> PAID FOR POLL WORKERS		<b>Date (MM/DD/YYYY)</b> 11/06/2018
<b>Fair Market Value</b> \$ 640.00				
<b>City</b> HUDSON		<b>State</b> OH	<b>Zip Code</b> 44313	<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>Fair Market Value</b>				
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>Fair Market Value</b>				
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>Fair Market Value</b>				
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>Fair Market Value</b>				
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and 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 \$ 640.00



**Statement of Loans Received**

Form 31-C

R.C. 3517.10

<b>Full Name of Committee</b> SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - JUDICIAL						
<b>From Whom Received</b> WAYNE JONES				<b>Prior Amount</b> \$24,500.00	<b>Amt. Incurred this Period</b>	
<b>Street Address</b> 1407 SAND RUN RD.					<b>Outstanding Balance</b> \$24,500.00	
<b>City</b> AKRON	<b>State</b> OH	<b>Zip Code</b> 44313	<b>Loans Received This Period</b>		<b>Payments This Period</b>	
<b>Date Loan was Originally Incurred (MM/DD/YYYY)</b> 10/27/2012			<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Registration Number, if PAC</b>			<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Employer/Occupation/Labor Organization*</b>			<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b>
<b>From Whom Received</b> THOMAS BEVAN				<b>Prior Amount</b> \$20,000.00	<b>Amt. Incurred this Period</b> \$25,000.00	
<b>Street Address</b> 530 MEADOWRIDGE					<b>Outstanding Balance</b> \$45,000.00	
<b>City</b> HUDSON	<b>State</b> OH	<b>Zip Code</b> 44236	<b>Loans Received This Period</b>		<b>Payments This Period</b>	
<b>Date Loan was Originally Incurred (MM/DD/YYYY)</b> 10/31/2017			<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Registration Number, if PAC</b>			<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Employer/Occupation/Labor Organization*</b>			<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b>

\* 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 \$ 44,500.00

Total Received This Period \$ 25,000.00 (also record on Form 31-A-2)

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

Total Outstanding Balance \$ 69,500.00 (also record on Form 30-A)