



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

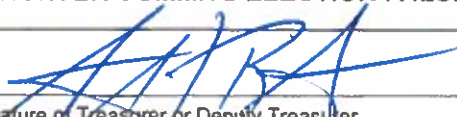
1. Amount brought forward from last report	13,161.70
2. Total monetary contributions (From Forms 31-A and 31-E)	33,151.00
3. Total other income (From Form 31-A-2)	10,000.00
4. Total funds available (sum of lines 1, 2, 3)	56,312.70
5. Total monetary expenditures (From Forms 31-B and 31-F)	53,373.26
6. Balance on hand (line 4 minus line 5)	2,939.44
7. Value of in-kind contributions received (From Form 31-J-1)	640.00
8. Value of in-kind contributions made (From Form 31-J-2)	
9. Outstanding loans owed by committee (From Form 31-C)	35,000.00
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 13 PM 3:38

SUMMIT COUNTY
BOARD OF ELECTIONS
AKRON OHIO 44311
#124730

**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
2

Other Pages
3

Total Pages
7

P2

SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - POLITICAL

Substitute form 31a

18-Oct Committee to Elect Michael Soyars	Check	\$ 5,245.00
26-Oct Friends of Eliabeth Walters	Check	\$ 5,478.00
26-Oct Friend of Clsir Dickenson	Check	\$ 4,978.00
27-Oct John A. Donofrio Campaign Committee	Check	\$ 2,000.00
27-Oct David Horner	Check	\$ 100.00
25-Oct Friends of Eliabeth Walters	Check	\$ 100.00
26-Oct Deborah Matz	Check	\$ 200.00
26-Oct Tim Crawford	Check	\$ 100.00
26-Oct Jason Dodson	Check	\$ 100.00
27-Jan Craig Stanley	Check	\$ 100.00
29-Oct Dennis Tubbs	Check	\$ 100.00
29-Oct James Hardey	Check	\$ 100.00
29-Oct Friends of Wilhite	Check	\$ 250.00
29-Oct Committee for Robert Genet	Check	\$ 100.00
29-Oct David Nott	Check	\$ 100.00
29-Oct Greta Johnson	Check	\$ 100.00
29-Oct Michael Migden	Check	\$ 100.00
29-Oct Friends of William Judge	Check	\$ 1,000.00
29-Oct Connie Kraus	Check	\$ 100.00
29-Oct Stephen Barry	Check	\$ 150.00
29-Oct Friends of Stephen Barry	Check	\$ 350.00
29-Oct The Berroteran Group	Check	\$ 500.00
29-Oct Wellness IQ	Check	\$ 500.00
28-Oct James Lawrence	Check	\$ 500.00
28-Oct Lori Lawrence	Check	\$ 500.00
26-Oct Anne Freund	Check	\$ 500.00
29-Oct Bernard Rochford	Check	\$ 500.00
27-Oct William Savage	Check	\$ 250.00
27-Oct Carl Ebner	Check	\$ 250.00
27-Oct Denise Randle	Check	\$ 250.00
25-Oct Mary Jones	Check	\$ 500.00
27-Oct Illya McGee	Check	\$ 250.00
1-Nov America 2.0 PAC (FEC C00417584)	Check	\$ 2,500.00
2-Nov Friends of the Tri-County Regional Labor	Check	\$ 500.00
2-Nov Dwight Alexander	Check	\$ 1,000.00
2-Nov Tim Ryan for Congress	Check	\$ 2,500.00
30-Oct Committee to Elect Michael Soysars	Check	\$ 500.00
30-Oct Sharon Reaves	Check	\$ 100.00
2-Nov Brian Nelson	Check	\$ 100.00
30-Oct Glaus, Pyle, Schomer, Burns & DeHaven (Joseph Ross)	Check	\$ 500.00
28-Nov Amelia Vaughn	EFT	\$ 50.00
7-Dec Shamis Malik	EFT	\$ 50.00
Total this page		\$ 33,151.00



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - POLITICAL			
Full Name of Contributor LOAN RECEIVED THIS PERIOD			Registration Number, if PAC
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount \$10,000.00
Full Name of Contributor			Registration Number, if PAC
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor			Registration Number, if PAC
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor			Registration Number, if PAC
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor			Registration Number, if PAC
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount

* 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.

Page Total \$ 10,000⁰⁰



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - POLITICAL			
To Whom Paid Graffiti Print Shop		Date (MM/DD/YYYY) 10/18/2018	Amount \$274.61
Street Address 739 N. Main St.		Purpose Printing	
City Akron	State OH	Zip Code 44310	Check Number 4368
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 4369
To Whom Paid Ohio Democratic Party		Date (MM/DD/YYYY) 10/18/2018	Amount \$5,145.00
Street Address		Purpose Donation	
City	State OH	Zip Code	Check Number 4370
To Whom Paid Graffiti Print Shop		Date (MM/DD/YYYY) 10/22/2018	Amount \$ 480.38
Street Address		Purpose T-Shirts	
City	State OH	Zip Code	Check Number 4371
To Whom Paid John S. Knight Center		Date (MM/DD/YYYY) 10/23/2018	Amount \$2,500.00
Street Address 77 E. Mill St.		Purpose Hall rental	
City Akron	State OH	Zip Code 44308	Check Number 4372

Page Total \$ 14,249⁹⁹



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - POLITICAL			
To Whom Paid Ohio Democratic Party		Date (MM/DD/YYYY) 10/29/2018	Amount \$19,000.00
Street Address 340 E. Fulton St.		Purpose Donation	
City Columbus	State OH	Zip Code 43215	Check Number 1974
To Whom Paid Cromwell & Co.		Date (MM/DD/YYYY) 10/31/2018	Amount \$14,812.26
Street Address 4 ALLCAP RIDGE		Purpose Printing	
City CROMWELL	State OH CT	Zip Code 06416	Check Number 4375
To Whom Paid Entertainment Media Consultant		Date (MM/DD/YYYY) 11/04/2018	Amount \$4,950.00
Street Address 1152 Herman St.		Purpose Music / Sound truck	
City Akron	State OH	Zip Code 44307	Check Number 4376
To Whom Paid Christopher Grimm		Date (MM/DD/YYYY) 11/05/2018	Amount 359.96
Street Address 508 Green Meadow Dr.		Purpose Reimbursement for food purchase	
City Tallmadge	State OH	Zip Code 44278	Check Number 4377
To Whom Paid Act Blue		Date (MM/DD/YYYY) 11/09/2018	Amount \$ 1.05
Street Address 366 Summer St		Purpose Collection fee	
City Sommerville	State MA	Zip Code 02144	Check Number EFT

Page Total \$ 39,123²⁷



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

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

Full Name of Committee SUMMIT COUNTY DEMOCRATIC EXECUTIVE COMMITTEE - POLITICAL						
From Whom Received THOMAS BEVAN				Prior Amount \$25,000.00	Amt. Incurred this Period \$10,000.00	
Street Address 530 MEADOWRIDGE					Outstanding Balance 435,000.00	
City HUSON	State OH	Zip Code 44236	Loans Received This Period		Payments This Period	
Date Loan was Originally Incurred (MM/DD/YYYY) 10/11/2013			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

* 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 \$ 25,000.00

Total Received This Period \$ 10,000.00 (also record on Form 31-A-2)

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

Total Outstanding Balance \$ 35,000.00 (also record on Form 30-A)