



#2825 AVC
SUMMIT COUNTY
BOARD OF ELECTIONS
AKRON, OHIO 44311

Ohio Campaign Finance Report

Form 30-A
ORC 3517.10

2019 JAN 31 AM 9:50

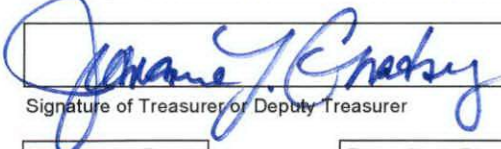
Committee Name Summit County Republican Golf PAC		Office Sought		District
Street Address 1755 Merriman Rd. Suite 250		City Akron	State OH	Zip 44313
Candidate Name OR PAC Registration Number		Treasurer Name Jeananne Chadsey		Election Date (MM/DD/YYYY)
Type of Report (choose one): <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Post-Primary <input 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				
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.

Year
2018

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SUMMIT COUNTY
BOARD OF ELECTIONS

1. Amount brought forward from last report	\$998.64
2. Total monetary contributions (From Forms 31-A and 31-E)	\$24.48
3. Total other income (From Form 31-A-2)	
4. Total funds available (sum of lines 1, 2, 3)	\$1,023.12
5. Total monetary expenditures (From Forms 31-B and 31-F)	
6. Balance on hand (line 4 minus line 5)	\$1,023.12
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)	

**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

01/31/2019
Date (MM/DD/YYYY)

Contribution Pages	Expenditure Pages	Other Pages	Total Pages
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Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee Summit County Republican Golf PAC			
Full Name of Contributor US Bank		Registration Number, if PAC	
Street Address PO Box 20005	Type* Refund	Date (MM/DD/YYYY) 09/20/2018	Form (Cash, Check, etc.) Check
City Owensboro	State KY	Zip Code 43201	Amount \$24.48
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.