



Committee Name <b>Committee to Elect Matt Browarek</b>		Office Sought		District
Street Address <b>1328 Hillandale Drive</b>		City <b>AKRON</b>	State <b>OH</b>	Zip <b>44333</b>
Candidate Name OR PAC Registration Number <b>MATT BROWAREK</b>		Treasurer Name <b>Sharon Browarek</b>		Election Date (MM/DD/YYYY)
<b>Type of Report</b> (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				Year <b>2018</b>
<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</b> (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	1727.18
2. Total monetary contributions (From Forms 31-A and 31-E)	0.00
3. Total other income (From Form 31-A-2)	0.00
4. Total funds available (sum of lines 1, 2, 3)	1727.18
5. Total monetary expenditures (From Forms 31-B and 31-F)	250.00
6. Balance on hand (line 4 minus line 5)	1477.18
7. Value of in-kind contributions received (From Form 31-J-1)	0.00
8. Value of in-kind contributions made (From Form 31-J-2)	0.00
9. Outstanding loans owed by committee (From Form 31-C)	0.00
10. Outstanding debts owed by committee (From Form 31-N)	0.00
11. Outstanding loans owed to committee (From Form 31-K)	0.00
12. Value of independent expenditures made (From Form 31-U)	

2019 JAN 31 PM 1:48  
 SUMMIT COUNTY BOARD OF ELECTIONS  
 AKRON OHIO 44311  
 #27830

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

*S Browarek*  
Signature of Treasurer or Deputy Treasurer

01/25/2019  
Date (MM/DD/YYYY)

Contribution Pages 0	Expenditure Pages 1	+ COVER PAGE	Other Pages 0	Total Pages 2
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Last Updated 09/2017  
+ Attached banking records (5)

NO OBJECTIONS  
SUMMIT COUNTY  
OFFICIAL COPY



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Summit County Democratic Party			
To Whom Paid Summit County Democratic Party Chris Grimm - Treasurer		Date (MM/DD/YYYY) 08/22/2018	Amount 250.00
Street Address 438 Grant Street		Purpose Political Contribution	
City AKRON	State OH OH	Zip Code 44311	Check Number 1022
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 \$ 250.00