

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Committee to Elect Gary Domanick</b>						Registration Number, if PAC					
Full Name of Candidate <b>Gary Domanick</b>											
Street Address <b>4445 Hawkins Rd</b>						Office Sought <b>Village Council</b>			District <b>Richfield</b>		
City <b>Richfield</b>						State <b>OH</b>		Zip Code <b>44286</b>			
Type of Report (place X to the left of report type)		Pre-Primary		Post-Primary		Pre-General		Post-General		Annual Year <b>2018</b>	
		July Monthly		August Monthly		September Monthly		Termination			
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Date of Election		M <b>1</b>	D <b>1</b>	Y <b>0</b>	Y <b>7</b>

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$ 1,238.34
2. Total monetary contributions (From Form No. 31-A)	\$ 125.00
3. Total other income (From Form No. 31-A-2)	\$ 0.00
4. Total funds available (sum of lines 1, 2, 3)	\$ 1,363.34
5. Total monetary expenditures (From Form No. 31-B)	\$ 1,363.34
6. Balance on hand (line 4 minus line 5)	\$ 0.00
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$ 0.00
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$ 0.00
9. Outstanding loans owed by committee (From Form No. 31-C)	\$ 0.00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$ 0.00
11. Outstanding loans owed to committee (From Form No. 31-K)	\$ 0.00
12. Value of independent expenditures made (From Form No. 31-U)	\$ 0.00
13. For Electronic Filing Entities only	\$
Sum of lines 2, 7 and amount of any new loans received this period	\$

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SUMMIT COUNTY  
BOARD OF ELECTIONS

2019 JAN 31 PM 2: 17  
 SUMMIT COUNTY  
 BOARD OF ELECTIONS  
 AKRON OHIO 44311  
 #2858 Av

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

**Bill Roemer Deputy Treasurer** \_\_\_\_\_ *[Signature]* \_\_\_\_\_ 1/27/19  
 Print Name and Title (Treasurer and Deputy Treasurer only) Signature Date

Contribution pages 1

Expenditure pages 1

Other pages 0

Total pages 2

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Committee to Gary Domanick</b>												
To Whom Paid <b>CTE Bill Roemer</b>						M	D	Y	Amount			
Address <b>3616 Southern Rd.</b>						0	8	1	4	1	8	520.34
Purpose <b>contribution</b>												
City <b>Richfield</b>		State <b>O</b>	H	Zip Code <b>44286</b>	Check Number <b>8323</b>							
To Whom Paid <b>Chase Bank</b>						M	D	Y	Amount			
Address <b>2435 Cleveland Massillon rd.</b>						0	1	3	1	1	8	15.00
Purpose <b>Bank Fees</b>												
City <b>Akron</b>		State <b>O</b>	H	Zip Code <b>44333</b>	Check Number <b>N/A</b>							
To Whom Paid <b>Chase Bank</b>						M	D	Y	Amount			
Address <b>2435 Cleveland Massillon rd.</b>						0	2	2	8	1	8	15.00
Purpose <b>Bank Fees</b>												
City <b>Akron</b>		State <b>O</b>	H	Zip Code <b>44333</b>	Check Number <b>N/A</b>							
To Whom Paid <b>CTE Bill Roemer</b>						M	D	Y	Amount			
Address <b>3616 Southern Rd.</b>						0	1	0	2	1	8	800.00
Purpose <b>contribution</b>												
City <b>Richfield</b>		State <b>O</b>	H	Zip Code <b>44286</b>	Check Number <b>8323</b>							
To Whom Paid <b>Chase Bank</b>						M	D	Y	Amount			
Address <b>2435 Cleveland Massillon rd.</b>						0	2	2	8	1	8	13.00
Purpose <b>Bank Fees</b>												
City <b>Akron</b>		State <b>O</b>	H	Zip Code <b>44333</b>	Check Number <b>N/A</b>							
To Whom Paid						M	D	Y	Amount			
Address												
City		State	H	Zip Code	Check Number							
To Whom Paid						M	D	Y	Amount			
Address												
City		State	H	Zip Code	Check Number							
To Whom Paid						M	D	Y	Amount			
Address												
City		State	H	Zip Code	Check Number							

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Committee to Elect Gary Domanick</b>							
Full Name of Contributor <b>Tom Johnston</b>					Registration Number, if PAC		
Street Address <b>2788 Stubbins Rd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Richfield</b>	State <b>O</b>   <b>H</b>	Zip Code <b>44286</b>	M <b>1</b>	D <b>2</b>	Y <b>0</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Eric Severn</b>					Registration Number, if PAC		
Street Address <b>1566 Marlowe Ave</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Akron</b>	State <b>O</b>   <b>H</b>	Zip Code <b>44313</b>	M <b>1</b>	D <b>2</b>	Y <b>0</b>	Amount <b>25.00</b>	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	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 appear. [R.C. 3517.10(B)(4)]