

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee Friends of Steve Marks						Registration Number, if PAC		
Full Name of Candidate Charles S. Marks								
Street Address 2538 Lansinger Rd						Office Sought		District
City Mogadore						State OH	Zip Code 44260	
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input type="checkbox"/> Post-Primary	<input type="checkbox"/> Pre-General	<input type="checkbox"/> Post-General	Annual Year 2018			
	<input type="checkbox"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly	<input type="checkbox"/> Termination	Semiannual			
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	D	Y

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 for 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	\$	697	05
2. Total monetary contributions (From Form No. 31-A)	\$		
3. Total other income (From Form No. 31-A-2)	\$		
4. Total funds available (sum of lines 1, 2, 3)	\$		
5. Total monetary expenditures (From Form No. 31-B)	\$	30	00
6. Balance on hand (line 4 minus line 5)	\$	667	05
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$		
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$		
9. Outstanding loans owed by committee (From Form No. 31-C)	\$		
10. Outstanding debts owed by committee (From Form No. 31-N)	\$		
11. Outstanding loans owed to committee (From Form No. 31-K)	\$		
12. Value of independent expenditures made (From Form No. 31-D)	\$		
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$		

2019 JAN 23 PM 3:28
 SUMMIT COUNTY BOARD OF ELECTIONS
 AKRON OHIO 44311
 #2632A/C

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.

Shannon M. Marks Treas. Shannon M. Marks 1-22-19
 Print Name and Title (Treasurer and Deputy Treasurer only) Signature Date

Contribution pages _____

Expenditure pages 1

Other pages 6

Total pages 8

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of Steve Marks					
To Whom Paid US Bank		M	D	Y	Amount
Address P.O. Box 1800		07/16/18		5.00	
City St. Paul		State OH	Zip Code MN 55101-0800	Check Number	
To Whom Paid US Bank		M	D	Y	Amount
Address P.O. Box 1800		08/14/18		5.00	
City St. Paul		State OH	Zip Code MN 55101-0800	Check Number	
To Whom Paid US Bank		M	D	Y	Amount
Address P.O. Box 1800		09/17/18		5.00	
City St. Paul		State OH	Zip Code MN 55101-0800	Check Number	
To Whom Paid U.S. Bank		M	D	Y	Amount
Address P.O. Box 1800		10/15/18		5.00	
City St. Paul		State OH	Zip Code MN 55101-0800	Check Number	
To Whom Paid U.S. Bank		M	D	Y	Amount
Address P.O. Box 1800		11/15/18		5.00	
City St. Paul		State OH	Zip Code MN 55101-0800	Check Number	
To Whom Paid U.S. Bank		M	D	Y	Amount
Address P.O. Box 1800		12/14/18		5.00	
City St. Paul		State OH	Zip Code MN 55101-0800	Check Number	
To Whom Paid		M	D	Y	Amount
Address					
City		State OH	Zip Code	Check Number	
To Whom Paid		M	D	Y	Amount
Address					
City		State OH	Zip Code	Check Number	