



Committee Name <i>Comm. to re-elect Russ Neal</i>		Office Sought <i>Council Ward 4</i>		District
Street Address <i>476 Moseley Ave</i>		City <i>AKRON</i>	State <i>OH</i>	Zip <i>44320</i>
Candidate Name OR PAC Registration Number <i>Russ Neal Jr</i>		Treasurer Name <i>Yolanda Neal</i>		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				
<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 (R.C. 3517.10(H))</b> <input type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions.

Year  
*2018*

1. Amount brought forward from last report	<i>655.46</i>
2. Total monetary contributions (From Forms 31-A and 31-E)	<i>0</i>
3. Total other income (From Form 31-A-2)	<i>0</i>
4. Total funds available (sum of lines 1, 2, 3)	<i>655.46</i>
5. Total monetary expenditures (From Forms 31-B and 31-F)	<i>185.00</i>
6. Balance on hand (line 4 minus line 5)	<i>470.46</i>
7. Value of in-kind contributions received (From Form 31-J-1)	<i>0</i>
8. Value of in-kind contributions made (From Form 31-J-2)	<i>0</i>
9. Outstanding loans owed by committee (From Form 31-C)	<i>2,058<sup>25</sup></i>
10. Outstanding debts owed by committee (From Form 31-N)	<i>1381<sup>03</sup></i>
11. Outstanding loans owed to committee (From Form 31-K)	<i>0</i>
12. Value of independent expenditures made (From Form 31-U)	<i>0</i>

OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS

2019 JAN 31 PM 3:28

SUMMIT COUNTY  
BOARD OF ELECTIONS  
AKRON OHIO 44311

# 2786 BAR

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

*Yolanda Neal*  
Signature of Treasurer or Deputy Treasurer

*1-31-19*  
Date (MM/DD/YYYY)

Contribution Pages  
*0*

Expenditure Pages  
*1*

Other Pages  
*15*

Total Pages  
*16*

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Statement of Expenditures

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> <i>Comm. To Re-Elect Russ Neal to City Council</i>			
To Whom Paid <i>Emilia Sykes Campaign</i>		Date (MM/DD/YYYY) <i>5-19-18</i>	Amount <i>125<sup>00</sup></i>
Street Address <i>109 N. Howard</i>		Purpose <i>Campaign Contribution</i>	
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44308</i>	Check Number <i>177</i>
To Whom Paid <i>Key Bank</i>		Date (MM/DD/YYYY) <i>12/08 - 12/08</i>	Amount <i>100<sup>00</sup></i>
Street Address		Purpose <i>Bank Service Fee</i>	
City <i>Akron</i>	State <i>OH</i>	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State <i>OH</i>	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State <i>OH</i>	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State <i>OH</i>	Zip Code	Check Number

Page Total \$ 185<sup>00</sup>

CUSTOMER ACCOUNT DISCLOSURES

The following disclosures apply only to accounts covered by the Federal Truth-in-Lending Act or the Federal Electronic Funds Transfer Act, as amended, or similar state laws.

IN CASE OF ERROR OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS:

Call us at the phone number indicated on the first page of this statement. Or write us at the address listed below, as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt. We must hear from you no later than sixty (60) days after we sent you the FIRST statement in which the problem or error appeared.

\* KeyBank  
Customer Disputes  
NY-31-17-0128  
17 Corporate Woods Blvd  
Albany, NY 12211

- Tell us your name and Account number.
Describe the error or transfer that you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within ten (10) business days.

We will investigate your complaint and will correct any error promptly. If we take more than ten (10) business days to do this, we will credit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation.

COMMON ELECTRONIC TRANSACTION DESCRIPTIONS:

- XFER TO SAV - Transfer to Savings Account
XFER FROM SAV - Transfer from Savings Account
XFER TO CCHK - Transfer to Checking Account
XFER FROM CCHK - Transfer from Checking Account
PMT TO CR CARD - Payment to Credit Card
ADV CR CARD - Advance from Credit Card

Unauthorized Credits: If you have arranged to have direct deposits made to your account at least once every day (60 days from the same person or company, you can tell us at the number indicated on the reverse side to find out whether or not the deposit has been made.

IMPORTANT LINE OF CREDIT INFORMATION

What To Do If You Think You Find A Mistake on Your Statement: If you think there is an error on your statement, write us at: KeyBank N.A., P.O. Box 93885, Cleveland, OH 44101-4825.

In your letter, give us the following information:

- Account Information: Your name and account number.
Dollar Amount: The dollar amount of the suspected error.
Description of the Problem: If you think there is an error on your bill, describe what you believe is wrong and why you believe it was a mistake.

You must contact us within 60 days after the error appeared on your statement. You must notify us of any potential errors in writing. You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
We can apply any unpaid amount against your credit limit.

Explanation of Finance Charge: Your Finance Charge attributable to interest hereafter referred to as interest is computed using the Average Daily Balance method.

Average Daily Balance method (Balance Subject to Interest Rate): Your interest is computed on all purchases and cash advances (collectively "advances") from the date each advance is posted until we receive payment in full (there is no grace period). We give the interest on your line of credit by multiplying the daily periodic rate by the Average Daily Balance of your line of credit (including current transactions) and multiplying by the number of days in the billing cycle. To get the Average Daily Balance we take the beginning balance of your line of credit each day, add any new advances or bills, and subtract any payments and credits, any non-financed fees and unpaid interest. We give us the daily balance. Then we add up all of your daily balances in the billing cycle and divide this total by the number of days in the billing cycle to get your Average Daily Balance.

CREDIT INFORMATION: If you believe we have reported inaccurate information about our account to a credit reporting agency, you may contact the credit reporting agency or write to us at:

by Credit Research Department
P.O. Box 94018
Cleveland, Ohio 44101-4518

Please include your account number, a copy of your credit report reflecting the inaccurate information, name, address, city, state, and zip code, and an explanation of why you believe the information is inaccurate.

BALANCING YOUR ACCOUNT

Please examine your statement and paid check information upon receipt. Erasures, alterations or irregularities should be reported promptly in accordance with your account agreement. The suggested steps below will help you balance your account.

INSTRUCTIONS

1. Verify and check off in your check register each deposit, check or other transaction shown on this statement.

Enter into your check register and SUBTRACT:
Checks or other deductions shown on our statement that you have not already entered.
The "Service charges", if any, shown on your statement.

Enter into your check register and ADD:
Deposits or other credits shown on your statement that you have not already entered.
The "Interest earned" shown on your statement, if any.

Table with columns for Check # or Date, Amount, Date, Amount. Includes instructions 2-5 and a TOTAL line.



# FOR PAPER FILING ONLY

## Statement of Loans Received

Prescribed by Secretary of State 3/05

Name of Committee <u>Comm. to Re-Elect Russ Neal to City Council</u>												
From Whom Received <u>Russ Neal</u>						Prior Amount <u>1000<sup>00</sup></u>		Amt. Incurred this Period				
Address <u>476 Moreley</u>								Outstanding Balance <u>1000<sup>00</sup></u>				
City <u>Akron</u>		State <u>OH</u>		Zip Code <u>44320</u>								
				Loans Received This Period				Payments This Period				
				Date		Amount		Date		Amount		
Date Loan was originally incurred		M	D	Y	M	D	Y	S	M	D	Y	S
		8	29	07								
Registration Number, if PAC				M	D	Y	M	D	Y			
				M	D	Y	M	D	Y			
Employer/Occupation/Labor Organization*				M	D	Y	M	D	Y			
				M	D	Y	M	D	Y			
From Whom Received <u>Russ Neal</u>						Prior Amount <u>\$8.25</u>		Amt. Incurred this Period				
Address <u>476 Moreley Ave</u>								Outstanding Balance <u>\$8.25</u>				
City <u>Akron</u>		State <u>OH</u>		Zip Code <u>44320</u>								
				Loans Received This Period				Payments This Period				
				Date		Amount		Date		Amount		
Date Loan was originally incurred		M	D	Y	M	D	Y	S	M	D	Y	S
		9	9	13								
Registration Number, if PAC				M	D	Y	M	D	Y			
				M	D	Y	M	D	Y			
Employer/Occupation/Labor Organization*				M	D	Y	M	D	Y			
				M	D	Y	M	D	Y			
From Whom Received <u>Russ Neal</u>						Prior Amount <u>1000<sup>00</sup></u>		Amt. Incurred this Period				
Address <u>476 Moreley</u>								Outstanding Balance <u>1000<sup>00</sup></u>				
City <u>Akron</u>		State <u>OH</u>		Zip Code <u>44320</u>								
				Loans Received This Period				Payments This Period				
				Date		Amount		Date		Amount		
Date Loan was originally incurred		M	D	Y	M	D	Y	S	M	D	Y	S
		8	7	15								
Registration Number, if PAC				M	D	Y	M	D	Y			
				M	D	Y	M	D	Y			
Employer/Occupation/Labor Organization*				M	D	Y	M	D	Y			
				M	D	Y	M	D	Y			

\* 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).

- 1 Total prior amount \$ 2058<sup>25</sup>
- 2 Total received this period \$ \_\_\_\_\_ (To Form No. 31-A-2)
- 3 Total payments this period \$ \$0.00 (To Form No. 31-B)
- 4 Total Outstanding Balance \$ 2058<sup>25</sup> (To Form No. 30-A)

# FOR PAPER FILING ONLY

• TKE Bill Rhodes inv 23194.pdf (132.93KB)

31-N

R.C. 3517.10

7

## Statement of Outstanding Debts

Prescribed by Secretary of State 2/01

Full Name of Committee <i>Comm To Re Elect Russ Neal to City Council</i>									
To Whom Owed <i>Duffetti Print Shop</i>					Prior Amount <i>1381.03</i>		Amt. Incurred this Period		
Address <i>739 North Main St.</i>					Item or Purpose of Debt		Outstanding Balance <i>1381.03</i>		
City <i>Akron</i>		State <i>OH</i>	Zip Code <i>44310</i>		Payments This Period				
Date Debt was originally incurred					Date		Amount		
Registration Number, if PAC					M	D	Y	S	
					M	D	Y		
					M	D	Y		
To Whom Owed					Prior Amount		Amt. Incurred this Period		
Address					Item or Purpose of Debt		Outstanding Balance		
City		State	Zip Code		Payments This Period				
Date Debt was originally incurred					Date		Amount		
Registration Number, if PAC					M	D	Y	S	
					M	D	Y		
					M	D	Y		
To Whom Owed					Prior Amount		Amt. Incurred this Period		
Address					Item or Purpose of Debt		Outstanding Balance		
City		State	Zip Code		Payments This Period				
Date Debt was originally incurred					Date		Amount		
Registration Number, if PAC					M	D	Y	S	
					M	D	Y		
					M	D	Y		

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.

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

Total Outstanding Balance \$ 1381.03 (also record on cover page)