



2019 JAN 31 AM 9:44

Committee Name Russell Sharnsky for Council at Large		Office Sought Council at Large		District
Street Address 471 Augusta Drive		City Fairlawn	State OH	Zip 44333
Candidate Name OR PAC Registration Number Russell Thomas Sharnsky		Treasurer Name Mary E. Sharnsky		Election Date (MM/DD/YYYY) 11/03/2015

**Type of Report** (choose one):

Annual  Semiannual  Pre-Primary  Post-Primary  Pre-General  Post-General

Statewide Candidates Only:

July Monthly  August Monthly  September Monthly

Year  
2018

**Amended Report**

No  Yes

**Termination**

Check this box if the committee wishes to terminate with this report

**Short Form Report** (R.C. 3517.10(H))

Check this box if the committee is filing a short term report. See attached instructions.

1. Amount brought forward from last report	551.47
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)	551.47
5. Total monetary expenditures (From Forms 31-B and 31-F)	35.00
6. Balance on hand (line 4 minus line 5)	516.47
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)	0.00

OFFICIAL COPY  
SUMMIT COUNTY  
BOARD OF ELECTIONS

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

*Mary E. Sharnsky*  
Signature of Treasurer or Deputy Treasurer

01/27/2019  
Date (MM/DD/YYYY)

Contribution Pages  
0

Expenditure Pages  
1

Other Pages  
0

Total Pages  
1



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Russell Sharnsky for Council at Large			
To Whom Paid Ohio Ethics Commission		Date (MM/DD/YYYY) 04/20/2018	Amount 35.00
Street Address 30 West Spring Street, L3		Purpose Ethics Statement Filing	
City Columbus	State OH	Zip Code 43215	Check Number 1008
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 \$ 35.00