

#2868 Ave



Ohio Campaign Finance Report

Form 30-A

ORC 3517.10

2019 JAN 31 PM 3:26

| | | | | |
|--|--|---|-------------|--|
| Committee Name COMMITTEE TO ELECT EDDIE SIPPLEN | | Office Sought MAYOR | | District |
| Street Address 1655 WEST MARKET STREET, STE 240 | | City AKRON | State OH | Zip 44313 |
| Candidate Name OR PAC Registration Number EDDIE SIPPLEN | | Treasurer Name PAMELA TAYLOR-SIPPLEN | | 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 | 1882.24 |
| 2. Total monetary contributions (From Forms 31-A and 31-E) | 0 |
| 3. Total other income (From Form 31-A-2) | 0 |
| 4. Total funds available (sum of lines 1, 2, 3) | 1882.24 |
| 5. Total monetary expenditures (From Forms 31-B and 31-F) | 0 |
| 6. Balance on hand (line 4 minus line 5) | 1882.24 |
| 7. Value of in-kind contributions received (From Form 31-J-1) | 0 |
| 8. Value of in-kind contributions made (From Form 31-J-2) | 0 |
| 9. Outstanding loans owed by committee (From Form 31-C) | 0 |
| 10. Outstanding debts owed by committee (From Form 31-N) | 1002.10 |
| 11. Outstanding loans owed to committee (From Form 31-K) | |
| 12. Value of independent expenditures made (From Form 31-U) | |

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

[Signature]
Signature of Treasurer or Deputy Treasurer

01/31/19
Date (MM/DD/YYYY)

Contribution Pages
0

Expenditure Pages
0

Other Pages
3

Total Pages
4



Statement of Outstanding Debts

Form 31-N
R.C. 3517.10

| | | | | |
|---|-------------|------------------------------|---|----------------------------------|
| Full Name of Committee COMMITTEE TO ELECT EDDIE SIPPLEN | | | | |
| To Whom Owed EDEDIE SIPPLEN | | | Prior Amount 80. ⁰⁰ | Amount Incurred this Period 0 |
| Street Address 1655 WEST MARKET STREET, STE 240 | | | Item or Purpose of Debt NAACP SCHOLARSH | Outstanding Balance 80.00 |
| City AKRON | State OH | Zip Code 44313 | Payments This Period | |
| Date Debt was Originally Incurred (MM/DD/YYYY) 06/15/15 | | Date of Payment (MM/DD/YYYY) | Amount 0 | |
| Registration Number, if PAC | | | Date of Payment (MM/DD/YYYY) | Amount 0 |
| [Redacted] | | | Date of Payment (MM/DD/YYYY) | Amount 0 |
| To Whom Owed EDDIE SIPPLEN | | | Prior Amount 279.66 | Amount Incurred this Period 0 |
| Street Address 1655 WEST MARKET STREET, STE 240 | | | Item or Purpose of Debt CAMPAIGN TSHIRTS | Outstanding Balance 279.66 |
| City AKRON | State OH | Zip Code 44313 | Payments This Period | |
| Date Debt was Originally Incurred (MM/DD/YYYY) 07/02/15 | | Date of Payment (MM/DD/YYYY) | Amount 0 | |
| Registration Number, if PAC | | | Date of Payment (MM/DD/YYYY) | Amount 0 |
| [Redacted] | | | Date of Payment (MM/DD/YYYY) | Amount 0 |

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 \$ 0

(also record on Form 31-B)

Total Outstanding Balance \$ 1002.10

(also record on cover page)



Statement of Outstanding Debts

Form 31-N
R.C. 3517.10

| | | | | |
|---|--------------------|------------------------------|---|--|
| Full Name of Committee COMMITTEE TO ELECT EDDIE SIPPLEN | | | | |
| To Whom Owed EDEDIE SIPPLEN | | | Prior Amount 250. ⁰⁰ | Amount Incurred this Period 0 |
| Street Address 1655 WEST MARKET STREET, STE 240 | | | Item or Purpose of Debt UNITED HOLINES CH | Outstanding Balance 250. ⁰⁰ |
| City AKRON | State OH | Zip Code 44313 | Payments This Period | |
| Date Debt was Originally Incurred (MM/DD/YYYY) 06/12/15 | | Date of Payment (MM/DD/YYYY) | Amount 0 | |
| Registration Number, if PAC | | | Date of Payment (MM/DD/YYYY) | Amount 0 |
| | | | Date of Payment (MM/DD/YYYY) | Amount 0 |
| To Whom Owed EDDIE SIPPLEN | | | Prior Amount 102.00 | Amount Incurred this Period 0 |
| Street Address 1655 WEST MARKET STREET, STE 240 | | | Item or Purpose of Debt CAMPAIGN STRATEG | Outstanding Balance 102.00 |
| City AKRON | State OH | Zip Code 44313 | Payments This Period | |
| Date Debt was Originally Incurred (MM/DD/YYYY) 06/26/15 | | Date of Payment (MM/DD/YYYY) | Amount 0 | |
| Registration Number, if PAC | | | Date of Payment (MM/DD/YYYY) | Amount 0 |
| | | | Date of Payment (MM/DD/YYYY) | Amount 0 |

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 \$ 0 (also record on Form 31-B)

Total Outstanding Balance \$ 1002.10 (also record on cover page)



Statement of Outstanding Debts

Form 31-N
R.C. 3517.10

| | | | | |
|---|-------------|------------------------------|--|----------------------------------|
| Full Name of Committee COMMITTEE TO ELECT EDDIE SIPPLEN | | | | |
| To Whom Owed EDEDIE SIPPLEN | | | Prior Amount 255.42 | Amount Incurred this Period 0 |
| Street Address 1655 WEST MARKET STREET, STE 240 | | | Item or Purpose of Debt COST OF CAMPAIGN | Outstanding Balance 255.42 |
| City AKRON | State OH | Zip Code 44313 | Payments This Period | |
| Date Debt was Originally Incurred (MM/DD/YYYY) 07/20/15 | | Date of Payment (MM/DD/YYYY) | Amount 0 | |
| Registration Number, if PAC | | | Date of Payment (MM/DD/YYYY) | Amount 0 |
| | | | Date of Payment (MM/DD/YYYY) | Amount 0 |
| To Whom Owed EDDIE SIPPLEN | | | Prior Amount 35.00 | Amount Incurred this Period 0 |
| Street Address 1655 WEST MARKET STREET, STE 240 | | | Item or Purpose of Debt OHIO ETHIC COMMIS | Outstanding Balance 35.00 |
| City AKRON | State OH | Zip Code 44313 | Payments This Period | |
| Date Debt was Originally Incurred (MM/DD/YYYY) 06/26/15 | | Date of Payment (MM/DD/YYYY) | Amount 0 | |
| Registration Number, if PAC | | | Date of Payment (MM/DD/YYYY) | Amount 0 |
| | | | Date of Payment (MM/DD/YYYY) | Amount 0 |

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 \$ 0 (also record on Form 31-B)

Total Outstanding Balance \$ 1002.10 (also record on cover page)