



Committee Name Committee to Elect Mike Zita		Office Sought Mayor		District Norton
Street Address 3565 Little Blvd		City Norton	State OH	Zip 44203
Candidate Name OR PAC Registration Number Mike Zita		Treasurer Name Kimberly A Zita		Election Date (MM/DD/YYYY) 11/03/15
<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</b> (R.C. 3517.10(H)) <input type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions.

1. Amount brought forward from last report	157.66
2. Total monetary contributions (From Forms 31-A and 31-E)	8700.00
3. Total other income (From Form 31-A-2)	0.00
4. Total funds available (sum of lines 1, 2, 3)	8857.66
5. Total monetary expenditures (From Forms 31-B and 31-F)	1185.55
6. Balance on hand (line 4 minus line 5)	7672.11
7. Value of in-kind contributions received (From Form 31-J-1)	200.00
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

2019 JAN 31 AM 8:53

SUMMIT COUNTY  
BOARD OF ELECTIONS  
AKRON OHIO 44311  
4127640

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

*Kimberly A Zita, Treasurer*  
Signature of Treasurer or Deputy Treasurer

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

Contribution Pages 9	Expenditure Pages 3	Other Pages 2	Total Pages 14
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**Statement of Contributions Received**

Form 31-A  
ORC 3517.10

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>Full Name of Contributor</b> Contributions from form 31-E			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Date (MM/DD/YYYY)</b> 09/25/2018	<b>Amount</b> 8700.00
<b>Full Name of Contributor</b>			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Full Name of Contributor</b>			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Full Name of Contributor</b>			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Full Name of Contributor</b>			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>

\*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)]



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Committee to Elect Mike Zita			
<b>To Whom Paid</b> McKenney for County Council		<b>Date (MM/DD/YYYY)</b> 08/28/2018	<b>Amount</b> 25.00
<b>Street Address</b> 5706 Sherwood Forest Drive		<b>Purpose</b> Donation	
<b>City</b> New Franklin	<b>State</b> OH	<b>Zip Code</b> 44319	<b>Check Number</b> 1061
<b>To Whom Paid</b> Target		<b>Date (MM/DD/YYYY)</b> 10/02/2018	<b>Amount</b> 29.98
<b>Street Address</b> 1183 Williams Reserve Blvd		<b>Purpose</b> Parade Candy	
<b>City</b> Wadsworth	<b>State</b> OH	<b>Zip Code</b> 44281	<b>Check Number</b> 1064
<b>To Whom Paid</b> Tractor Supply		<b>Date (MM/DD/YYYY)</b> 10/05/2018	<b>Amount</b> 31.97
<b>Street Address</b> 180 Great Oaks Trail, Suite A		<b>Purpose</b> Hay for Ciderfest	
<b>City</b> Wadsworth	<b>State</b> OH	<b>Zip Code</b> 44281	<b>Check Number</b> 1065
<b>To Whom Paid</b> Boy Scout Troop 132		<b>Date (MM/DD/YYYY)</b> 10/06/2018	<b>Amount</b> 76.00
<b>Street Address</b> c/o 3215 BROOKLAWN DR		<b>Purpose</b> Ad and Breakfasts	
<b>City</b> Norton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1066
<b>To Whom Paid</b> Walmart		<b>Date (MM/DD/YYYY)</b> 10/24/2018	<b>Amount</b> 78.16
<b>Street Address</b> 222 Smokerise Drice		<b>Purpose</b> Spooktacular candy	
<b>City</b> Wadsworth	<b>State</b> OH	<b>Zip Code</b> 44281	<b>Check Number</b> 1067

Page Total \$ 241.11



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Committee to Elect Mike Zita			
To Whom Paid Target		Date (MM/DD/YYYY) 12/19/2018	Amount 40.76
Street Address 1183 Williams Reserve Blvd		Purpose Gifts	
City Wadsworth	State OH	Zip Code 44281	Check Number 1068
To Whom Paid Sams Club		Date (MM/DD/YYYY) 12/18/2018	Amount 95.82
Street Address 3750 W Market Street		Purpose Gifts	
City Fairlawn	State OH	Zip Code 44333	Check Number 1069
To Whom Paid Sams Club		Date (MM/DD/YYYY) 12/31/2018	Amount 112.26
Street Address 3750 W Market Street		Purpose Food - Safety Forces	
City Fairlawn	State OH	Zip Code 44333	Check Number 1091
To Whom Paid Acme		Date (MM/DD/YYYY) 12/31/2018	Amount 172.68
Street Address 3200 Greenwich Rd.		Purpose Food - Safety Forces	
City Norton	State OH	Zip Code 44203	Check Number 1092
To Whom Paid Expenditures from form 31-F		Date (MM/DD/YYYY) 09/25/2018	Amount 522.92
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 944.44



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>Full Name of Contributor</b> Sophie Albrecht			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 208 Overwood Road		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/16/2018
<b>Amount</b> 250.00				
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44313	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Mark Burns			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 820 Deepwoods Drive		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/22/2018
<b>Amount</b> 100.00				
<b>City</b> Aurora	<b>State</b> OH	<b>Zip Code</b> 44202	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Valerie Carr			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 3592 Keyser Parkway		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/13/2018
<b>Amount</b> 50.00				
<b>City</b> Cuyahoga Falls	<b>State</b> OH	<b>Zip Code</b> 44223	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Stephen Comunale			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 2300 Sourek Trail		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/24/2018
<b>Amount</b> 250.00				
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44313	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Marshall Pitchford			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 209 S. Main Street, 3rd Floor		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/19/2018
<b>Amount</b> 250.00				
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44308	<b>Form (Cash, Check, Etc)</b> Check	

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 900.00



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>Full Name of Contributor</b> Environmental Design Group PAC			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 450 Grant Street		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/12/2018
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44311	<b>Amount</b> 100.00
<b>Form (Cash, Check, Etc)</b> Check				
<b>Full Name of Contributor</b> James Fisher			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 7590 W ParksideDr.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/24/2018
<b>City</b> Youngstown		<b>State</b> OH	<b>Zip Code</b> 44512	<b>Amount</b> 250.00
<b>Form (Cash, Check, Etc)</b> Check				
<b>Full Name of Contributor</b> Robin Huff			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 7005 River Styx Road		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/17/2018
<b>City</b> Medina		<b>State</b> OH	<b>Zip Code</b> 44256	<b>Amount</b> 500.00
<b>Form (Cash, Check, Etc)</b> Check				
<b>Full Name of Contributor</b> John Frola, Jr.			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 3197 N. Jackson Blvd.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/25/2018
<b>City</b> Uniontown		<b>State</b> OH	<b>Zip Code</b> 44685	<b>Amount</b> 250.00
<b>Form (Cash, Check, Etc)</b> Check				
<b>Full Name of Contributor</b> Kate Bilinki			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 4110 Knollbrook Dr.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/11/2018
<b>City</b> Norton		<b>State</b> OH	<b>Zip Code</b> 44203	<b>Amount</b> 100.00
<b>Form (Cash, Check, Etc)</b> Check				

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 1200.00



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

Full Name of Committee Committee to Elect Mike Zita				
Full Name of Contributor Ryan Black			Registration Number, if PAC	
Street Address 9977 DarrowPark Dr., Apt. 121-A		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/11/2018
Amount 100.00				
City Twinsburg		State OH	Zip Code 44087	Form (Cash, Check, Etc) Check
Full Name of Contributor Leonard Blankenship				
Full Name of Contributor Leonard Blankenship			Registration Number, if PAC	
Street Address 4382 Rockcut Rd.		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/11/2018
Amount 100.00				
City Norton		State OH	Zip Code 44203	Form (Cash, Check, Etc) Check
Full Name of Contributor Travis Bowman				
Full Name of Contributor Travis Bowman			Registration Number, if PAC	
Street Address 348 Loma Drive		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/11/2018
Amount 100.00				
City Akron		State OH	Zip Code 44319	Form (Cash, Check, Etc) Check
Full Name of Contributor Justin Butterfield				
Full Name of Contributor Justin Butterfield			Registration Number, if PAC	
Street Address 2166 Martin Crest Dr.		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/11/2018
Amount 100.00				
City Akron		State OH	Zip Code 44312	Form (Cash, Check, Etc) Check
Full Name of Contributor Ryan Cummins				
Full Name of Contributor Ryan Cummins			Registration Number, if PAC	
Street Address 3125 Oser Road		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/11/2018
Amount 50.00				
City Norton		State OH	Zip Code 44203	Form (Cash, Check, Etc) Check

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event





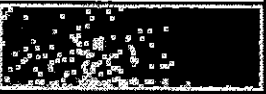
Total Expenditures This Event

Page Total \$ 450.00



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>Full Name of Contributor</b> Curtis Deibel			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 3009 Bronco Dr.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/11/2018
<b>Amount</b> 100.00				
<b>City</b> Clintonn		<b>State</b> OH	<b>Zip Code</b> 44216	<b>Form (Cash, Check, Etc)</b> Check
				
<b>Full Name of Contributor</b> Paul Voth			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1021 Monmouth Dr.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/11/2018
<b>Amount</b> 100.00				
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44313	<b>Form (Cash, Check, Etc)</b> Check
				
<b>Full Name of Contributor</b> Steven Hamit			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 2245 University Dr., SE		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/25/2018
<b>Amount</b> 100.00				
<b>City</b> Massillon		<b>State</b> OH	<b>Zip Code</b> 44646	<b>Form (Cash, Check, Etc)</b> Check
				
<b>Full Name of Contributor</b> Paul Jackson			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 103 Oak Hill Circle		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/25/2018
<b>Amount</b> 100.00				
<b>City</b> Rootstown		<b>State</b> OH	<b>Zip Code</b> 44272	<b>Form (Cash, Check, Etc)</b> Check
				
<b>Full Name of Contributor</b> William Judge			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 476 E. State Street		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/25/2018
<b>Amount</b> 100.00				
<b>City</b> Barberton		<b>State</b> OH	<b>Zip Code</b> 44203	<b>Form (Cash, Check, Etc)</b> Check
				

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 500.00





**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>Full Name of Contributor</b> Peter Kostoff			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 526 Meredith Lane		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/14/2018
<b>Amount</b> 500.00				
<b>City</b> Cuyahoga Falls		<b>State</b> OH	<b>Zip Code</b> 44223	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Jill Lanzinger			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 202 Melody Lane		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/25/2018
<b>Amount</b> 100.00				
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44319	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Emily Lipovan			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 232 Ravenshollow Drive		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/25/2018
<b>Amount</b> 150.00				
<b>City</b> Cuyahoga Falls		<b>State</b> OH	<b>Zip Code</b> 44223	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> James Little			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 920 Rosemarie Circle		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/11/2018
<b>Amount</b> 750.00				
<b>City</b> Wadsworth		<b>State</b> OH	<b>Zip Code</b> 44281	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Justin Markey			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 7340 Lacosta Drive		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/23/2018
<b>Amount</b> 500.00				
<b>City</b> Hudson		<b>State</b> OH	<b>Zip Code</b> 44236	<b>Form (Cash, Check, Etc)</b> Check

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Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 2000.00



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>Full Name of Contributor</b> Todd McKenney			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 5706 Sherwood Forest Dr.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/25/2018
<b>Amount</b> 200.00				
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44319	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Daniel Neubert				
<b>Street Address</b> 2377 Carousel Court			<b>Employer/Occupation/Labor Organization*</b>	
<b>Date (MM/DD/YYYY)</b> 09/11/2018		<b>Amount</b> 125.00		
<b>City</b> Westlake		<b>State</b> OH	<b>Zip Code</b> 44145	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> John Oliverio				
<b>Street Address</b> 6070 Sea Pines Dr.			<b>Employer/Occupation/Labor Organization*</b>	
<b>Date (MM/DD/YYYY)</b> 09/13/2018		<b>Amount</b> 125.00		
<b>City</b> Mentor		<b>State</b> OH	<b>Zip Code</b> 44060	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Ronny Portz				
<b>Street Address</b> 689 CR 2654			<b>Employer/Occupation/Labor Organization*</b>	
<b>Date (MM/DD/YYYY)</b> 09/12/2018		<b>Amount</b> 500.00		
<b>City</b> Loudonville		<b>State</b> OH	<b>Zip Code</b> 44842	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Greg Roehrich				
<b>Street Address</b> 13050 LakewoodTrail			<b>Employer/Occupation/Labor Organization*</b>	
<b>Date (MM/DD/YYYY)</b> 09/25/2018		<b>Amount</b> 750.00		
<b>City</b> Doylestown		<b>State</b> OH	<b>Zip Code</b> 44230	<b>Form (Cash, Check, Etc)</b> Check

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 1700.00



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>Full Name of Contributor</b> Steve W. Funk, Esq.			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 222 S. Main Street, Suite 400		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 09/14/2018	<b>Amount</b> 250.00
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44308	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Paul L. Jackson, Esq.			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 222 S. Main Street, Suite 400		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 09/14/2018	<b>Amount</b> 250.00
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44308	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Justin P. Markey, Esq.			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 222 S. Main Street, Suite 400		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 09/14/2018	<b>Amount</b> 250.00
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44308	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> William Scala			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 700 Home Ave.		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 09/24/2018	<b>Amount</b> 500.00
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44310	<b>Form (Cash, Check, Etc)</b> Check
<b>Full Name of Contributor</b> Dalia Spisak			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 4051 Brookside Court		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 09/25/2018	<b>Amount</b> 100.00
<b>City</b> Norton		<b>State</b> OH	<b>Zip Code</b> 44203	<b>Form (Cash, Check, Etc)</b> Check

\* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 1350.00



**Statement of Contributions Received  
at a Social or Fund-Raising Event**

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>Full Name of Contributor</b> Jennifer Syx			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 103 Ravenshollow Dr.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/19/2018
<b>Amount</b> 250.00				
<b>City</b> Cuyahoga Falls		<b>State</b> OH	<b>Zip Code</b> 44223	
<b>Form (Cash, Check, Etc)</b> Check				
<b>Full Name of Contributor</b> Tom Tucker			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 155 Highland Ave.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/15/2018
<b>Amount</b> 100.00				
<b>City</b> Wadsworth		<b>State</b> OH	<b>Zip Code</b> 44281	
<b>Form (Cash, Check, Etc)</b> Check				
<b>Full Name of Contributor</b> Jason Wells			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 3340 Hemphill Rd.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09/14/2018
<b>Amount</b> 250.00				
<b>City</b> Norton		<b>State</b> OH	<b>Zip Code</b> 44203	
<b>Form (Cash, Check, Etc)</b> Check				
<b>Full Name of Contributor</b> Tom Wichert			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1200 Graham Rd.		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 10/15/2018
<b>Amount</b> 50.00				
<b>City</b> Cuyahoga Falls		<b>State</b> OH	<b>Zip Code</b> 44224	
<b>Form (Cash, Check, Etc)</b> Check				
<b>Full Name of Contributor</b>			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b>
<b>Amount</b>				
<b>City</b>		<b>State</b>	<b>Zip Code</b>	
<b>Form (Cash, Check, Etc)</b>				

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event  
8700.00

Total Expenditures This Event  
522.92

Page Total \$ 600.00



**Statement of Expenditures for Social or Fund-Raising Event**

Form 31-F  
R.C. 3517.10

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>To Whom Paid</b> Sams Club		<b>Date (MM/DD/YYYY)</b> 09/25/2018		<b>Amount</b> 32.91
<b>Street Address</b> 3750 W Market Street		<b>Purpose</b> Food and Signage		
<b>City</b> Fairlawn	<b>State</b> OH	<b>Zip Code</b> 44333	<b>Check Number</b> 1062	
<b>To Whom Paid</b> Mucky Duck Brewery		<b>Date (MM/DD/YYYY)</b> 09/25/2018		<b>Amount</b> 490.01
<b>Street Address</b> 4019 S Main St.		<b>Purpose</b> Food		
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44319	<b>Check Number</b> 1063	
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>		<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Check Number</b>	
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>		<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Check Number</b>	
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>		<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Check Number</b>	

Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

Page Total \$ 522.92



**In-Kind Contributions Received**

Form 31-J-1  
R.C. 3517.10

<b>Full Name of Committee</b> Committee to Elect Mike Zita				
<b>Full Name of Contributor</b> Mucky Duck Brewery		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b> 4019 S Main St.		<b>Description of Item or Service</b> Room Rental		<b>Date (MM/DD/YYYY)</b> 09/25/2018
<b>Fair Market Value</b> 200.00				
<b>City</b> Akron		<b>State</b> OH	<b>Zip Code</b> 44319	<b>Received at Fundraising Event?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>Fair Market Value</b>				
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>Fair Market Value</b>				
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>Fair Market Value</b>				
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>Fair Market Value</b>				
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

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