

Ohio Campaign Finance Report

Form 30-A

ORC 3517.10

Committee Name Committee to Elect Mike Freeman			Office Sought Akron City Council Ward 9					District	
Committee to Elect Mi					HCII	ward 9			
Street Address		City			State Zip				
2526 Nesmith Lake Blvd.		Akron	Akron			OH 44314			
Candidate Name OR PAC Registration Number Treas						Election Date (MM/DD/YYYY)			YYYY)
Karen K			nan 05/07/2019						
Type of Report (cho	ose one):								
Annual Se	emiannual X Pre-Primary	Post-Pr	rimary Pre	-Genera		Pos	t-General		
Statewide Candidate	s Only:							Year	
☐ July Monthly ☐	August Monthly Se	eptember Mon	thly					2019	9
Amended Report	Termination		Short Form R	eport (R	.C. 351	7.10	O(H))		
No	Check this box if the co						ee is filing a		
	wishes to terminate wit	th this report	short term	report. S	See atta	iche	ed instructions.		
1. Amount broug	ht forward from last report			2005.27					
2. Total monetary	contributions (From Forms	s 31-A and 31-	E)	100.00					
3. Total other income (From Form 31-A-2)				0					
4. Total funds available (sum of lines 1, 2, 3)				2105.27					
5. Total monetary expenditures (From Forms 31-B and 31-F)			F)	347.85					
6. Balance on hand (line 4 minus line 5)				1757.42				355	1
7. Value of in-kind contributions received (From Form 31-J-1)			J-1)	0				200	λ
8. Value of in-kind contributions made (From Form 31-J-2)				0				1011	- C
9. Outstanding loans owed by committee (From Form 31-C)			C)	0			2		V
10. Outstanding debts owed by committee (From Form 31-N)			-N)	0 20					A
11. Outstanding loans owed to committee (From Form 31-K)			K)	0					C
12. Value of independent expenditures made (From Form 31-U)			31-U)	0					
	T IS MADE UNDER PENAL MITS ELECTION FALSIFICA				HE FIF	тн	DEGREE.		
Karene	- Free				04/25				
Signature of Treasurer of	r Deputy Treasurer				Date (VIIVI/[DD/YYYY)		
Contribution Pages	Expenditure Pages	Other	Pages	Total P	ages				





Statement of Contributions Received

Form 31-A

ORC 3517 10

					ORG 3317.10		
Full Name of Committee							
Committee to Elect Mike Freeman							
Full Name of Contributor				Registration Number, if PAC			
Tri County Building Trades PCE							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
67 S. Maple Street	Tri County Building Trades PCE chek				chek		
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount		
Akron	ОН	44302		04/02/2019	100.00		
Full Name of Contributor				Registration Number	er, if PAC		
Street Address	Employe	r/Occupation/Labor Or	rganization*		Form (Cash, Check, etc.)		
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount		
Full Name of Contributor				Registration Number, if PAC			
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount		
Full Name of Contributor				Registration Number, if PAC			
Street Address Employer/Occupation/Labor Organization			rganization*	Form (Cash, Check, etc.)			
City	State	Zip Code	Date (MM/DD/YYYY)		Amount		
Full Name of Contributor				Registration Number, if PAC			
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)			Form (Cash, Check, etc.)			
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount		

*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)]

Page	Total	100.00	





Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee								
Committee to Elect Mike Freeman								
To Whom Paid	Date (MM/DD/YYY)		Date (MM/DD/YYYY)	WA-11-	Amount			
Summit County Board of Elections			02/04/20	019	20.0			
Street Address Purpose								
470 Grant Street) Grant Street filing fees							
City	State Zip Code			Che	Check Number			
Akron	он 44311		246	246				
To Whom Paid	Date (MM/DD/YYYY)		Date (MM/DD/YYYY)		Amount			
Summit County Board of Elections		02/04/			019 25.00			
Street Address	Purpose							
470 Grant Street	70 Grant Street filing fees							
City	State	State Zip Code		Check Number				
Akron	ОН	443	44311		247			
To Whom Paid			Date (MM/DD/YYYY)		Amount			
First Class Campaigns		03/02/2019 267.85			267.85			
Street Address Purpose								
1460 Curtis Avenue marketing								
City	State	Zip Code		Check Number				
Cuyahoga Falls	ОН	442	44221		248			
To Whom Paid	Date (MM/DD/YYYY)		Date (MM/DD/YYYY)	Amount				
Ohio Ethics Commission	04/10/2			019 35.00				
Street Address Purpose								
Spring Street ethics report								
City	State	Zip (ip Code		Check Number			
Columbus	ОН	43215		debit				
To Whom Paid		Date (MM/DD/YYYY)			Amount			
Street Address	Purpose							
City	State	Zip	Code	Che	ck Number			
	ОН							

	347.85	
Page Total	\$	