



Committee Name Committee to Elect MATT BROWAREK		Office Sought		District
Street Address 1328 Hillandale Drive		City AKRON	State OH	Zip 44333
Candidate Name OR PAC Registration Number MATT BROWAREK		Treasurer Name Sharon Browarek		Election Date (MM/DD/YYYY)
Type of Report (choose one): <input type="checkbox"/> Annual <input checked="" 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				
Amended Report <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		Termination <input type="checkbox"/> Check this box if the committee wishes to terminate with this report		Short Form Report (R.C. 3517.10(H)) <input type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions.

Year
2019

1. Amount brought forward from last report	1477.18	
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)	1477.18	19 JUL 29 AM 11:40
5. Total monetary expenditures (From Forms 31-B and 31-F)	170.00	
6. Balance on hand (line 4 minus line 5)	1307.18	
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**

#3399 Av
19 JUL 29 AM 11:40

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

S Browarek
Signature of Treasurer or Deputy Treasurer

07/25/2019
Date (MM/DD/YYYY)

Contribution Pages
0

Expenditure Pages
1

Other Pages
0

Total Pages
2

+ cover PAGE

+ copies of bank receipts



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee			
To Whom Paid Cable for Judge (Deborah MATZ TREASURER)		Date (MM/DD/YYYY) 01/24/2019	Amount \$ 100.00
Street Address 2435 CALL ROAD		Purpose Political Contribution	
City Stow	State OH	Zip Code 44224	Check Number 1023
To Whom Paid Summit County Democratic Party		Date (MM/DD/YYYY) 04/06/2019	Amount \$ 70.00
Street Address P.O. Box 477		Purpose Political Contribution	
City BATH	State OH	Zip Code 44210	Check Number 1025
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 \$ 170.00