



Committee Name Friends of Shorter Griffin		Office Sought City Council		District
Street Address 225 Stanley Ave		City Barberton	State oh	Zip 44203
Candidate Name OR PAC Registration Number Shorter Griffin		Treasurer Name Shorter Griffin		Election Date (MM/DD/YYYY) 09/10/19

**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: 2019

**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	
2. Total monetary contributions (From Forms 31-A and 31-E)	2435.00
3. Total other income (From Form 31-A-2)	6720.00
4. Total funds available (sum of lines 1, 2, 3)	9155.00
5. Total monetary expenditures (From Forms 31-B and 31-F)	7763.35
6. Balance on hand (line 4 minus line 5)	1391.65
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)	\$6720.00
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 AUG 28 AM 8:21

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

  
Signature of Treasurer or Deputy Treasurer

08/27/19  
Date (MM/DD/YYYY)

Contribution Pages 6	Expenditure Pages 5	Other Pages 1	Total Pages 12
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Date	Description	Amount
1940-01-01	Balance forward	100.00
1940-01-15	Received from...	50.00
1940-02-01	Paid for...	25.00
1940-02-15	Received from...	75.00
1940-03-01	Paid for...	30.00
1940-03-15	Received from...	100.00
1940-04-01	Balance forward	270.00
1940-04-15	Received from...	150.00
1940-05-01	Paid for...	75.00
1940-05-15	Received from...	200.00
1940-06-01	Balance forward	445.00
1940-06-15	Received from...	300.00
1940-07-01	Paid for...	150.00
1940-07-15	Received from...	500.00
1940-08-01	Balance forward	1095.00
1940-08-15	Received from...	750.00
1940-09-01	Paid for...	375.00
1940-09-15	Received from...	1250.00
1940-10-01	Balance forward	2470.00
1940-10-15	Received from...	1500.00
1940-11-01	Paid for...	750.00
1940-11-15	Received from...	3000.00
1940-12-01	Balance forward	6220.00
1940-12-15	Received from...	4000.00
1941-01-01	Balance forward	10220.00

THE STATEMENT OF THE ACCOUNTS FOR THE YEAR 1940-1941 IS AS FOLLOWS:



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

Form 31-F  
R.C. 3517.10

<b>Full Name of Committee</b> Friends of Shorter Griffin				
<b>To Whom Paid</b> M&M Taphouse		<b>Date (MM/DD/YYYY)</b> 06/27/19		<b>Amount</b> 176.87
<b>Street Address</b> 523 West Tuscarawas Avenue		<b>Purpose</b> Food for Fundraiser		
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1502	
<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>	
<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 \$ 176.87

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**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Friends of Shorter Griffin				
<b>Full Name of Contributor</b> Leon Ricks			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 118 First St SE		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b> Casj
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Date (MM/DD/YYYY)</b> 07/01/19	<b>Amount</b> 50.00
<b>Full Name of Contributor</b> Melissa C. Dean			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 3857 Heron Watch		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b> Check
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44319	<b>Date (MM/DD/YYYY)</b> 07/11/19	<b>Amount</b> 35.00
<b>Full Name of Contributor</b> Kenneth R Cox			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 869 Arroyo Dr		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b> Check
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Date (MM/DD/YYYY)</b> 07/16/19	<b>Amount</b> 50.00
<b>Full Name of Contributor</b> (Contributions from form 31E)			<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> 06/27/19	<b>Amount</b> 2300.00
<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>

\*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 Contributions Received  
at a Social or Fund-Raising Event**

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

<b>Full Name of Committee</b> Friends of Shorter Griffin				
Full Name of Contributor Charles Debose			Registration Number, if PAC	
Street Address 2794 Valley Rd	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 25.00
City Cuyahoga Falls	State OH	Zip Code 44223	Form (Cash, Check, Etc) Check	
Full Name of Contributor Essie M. Adams			Registration Number, if PAC	
Street Address 928 Morningstar Dr.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/24/19	Amount 10.00
City Akron	State OH	Zip Code 44307	Form (Cash, Check, Etc) Check	
Full Name of Contributor Thomas W. Bevan			Registration Number, if PAC	
Street Address 530 Meadow Ridge Way	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/26/19	Amount 75.00
City Boston Hts	State OH	Zip Code 44236	Form (Cash, Check, Etc) Check	
Full Name of Contributor Margaret Scott			Registration Number, if PAC	
Street Address 3776 Fairway Park DR	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 75.00
City Copley	State OH	Zip Code 44321	Form (Cash, Check, Etc) Check	
Full Name of Contributor Norma Jean Grigalunas			Registration Number, if PAC	
Street Address 1544 Harden DR	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 25.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) 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 \$ 210.00

State and Contributions Received  
at a Bond - Fund Raising Event

10/11/77

10/11/77

Donor Name	Address	City	State
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This document is a record of contributions received at a bond fund raising event. It lists the names and addresses of donors, as well as the amount of their contributions. The data is organized into a table with columns for Donor Name, Address, City, and State. The total amount received is \$10,000.00. The document is dated 10/11/77.



**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> Friends of Shorter Griffin				
Full Name of Contributor Sandra J. Kurt			Registration Number, if PAC	
Street Address 140 Mayfield Ave	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 75.00
City Akron	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Friends of Kristen M. Scalise			Registration Number, if PAC	
Street Address 274 Harvest DR	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/25/19	Amount 75.00
City Akron	State OH	Zip Code 44333	Form (Cash, Check, Etc) Check	
Full Name of Contributor Terry L Avant			Registration Number, if PAC	
Street Address 1066 Belleview Ave	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 75.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Wilbur L Frey Jr			Registration Number, if PAC	
Street Address 1657 Harden DR	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 40.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Tim S Crawford			Registration Number, if PAC	
Street Address 4109 Cleveland Massillon RD	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/26/19	Amount 50.00
City Norton	State OH	Zip Code 44203	Form (Cash, Check, Etc) 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 \$ 315.00



SECRET  
U.S. GOVERNMENT PRINTING OFFICE  
1964 O 348-000

10-10-64

NO.	NAME	ADDRESS	CITY	STATE	ZIP
1	...	...	...	...	...
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50	...	...	...	...	...



**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> Friends of Shorter Griffin				
<b>Full Name of Contributor</b> Stephanie R Sykes			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 750 Dahlia Circle		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 06/27/19	<b>Amount</b> 75.00
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Colleen B Kelly			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 320 Westberry Circle		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 06/27/19	<b>Amount</b> 50.00
<b>City</b> Tallmadge	<b>State</b> OH	<b>Zip Code</b> 44278	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> William Paul Bezbatchesko			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 2093 Newberry ST.APT 1		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 06/27/19	<b>Amount</b> 35.00
<b>City</b> Cuyahoga Falls	<b>State</b> OH	<b>Zip Code</b> 44221	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Paul F Adamson			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 4839 Encino DR		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 06/27/19	<b>Amount</b> 125.00
<b>City</b> New Franklin	<b>State</b> OH	<b>Zip Code</b> 44319	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Michael E Vinay			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1493 Wilsonway		<b>Employer/Occupation/Labor Organization*</b>	<b>Date (MM/DD/YYYY)</b> 06/27/19	<b>Amount</b> 75.00
<b>City</b> Barberton	<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 \$ 360.00

# Statement of Contributions Received at a Social or Fund-Raising Event - Form 31-E

The Statement of Contributions for a Social or Fund-Raising Event form is used when a specific event is held on a specific date. It is not uncommon for activity from one event to appear in more than one report because the dates sometimes overlap a reporting deadline [R.C. 3517.10(B)].

The date that the event was held should appear on the line at the top of the page labeled Event Date.

The treasurer is responsible for tracking everything received and expended regardless of whether it must appear within the report. "Passing the hat" or similar practices should not be used unless detailed records are kept. Treasurers are responsible for ensuring that anyone collecting contributions is properly trained to obtain names, addresses, amounts and dates relevant to all contributions. Pursuant to an investigation, the board of elections or secretary of state may request to see an itemized list of all contributors [R.C. 3517.10(D)].

Political parties are exempt from listing contributor addresses.

Ongoing efforts to raise funds, such as continuous sales of T-shirts or cookbooks, are not fund-raising events. All contributions from such methods should appear on the general Statement of Contributions and are not exempt from itemization.

Fund-raising events may *not* be combined. Each fund-raising event must be reported on its own Statement of Contributions Received at a Social or Fund-Raising Event form and Statement of Expenditures for Social or Fund-Raising Event form.

The names and street address of contributors who give a total of \$25 or less at a particular fund-raising event do not have to be itemized in the report. Such an entry should read "Contributors of \$25 or less." Do not report selling "30 tickets at \$10 each." There is no way to determine how many tickets one person purchased from a statement based on ticket price [R.C. 3517.10(B)(4)(e)].

The State block should be completed with the U.S. Post Office's standard two-letter abbreviation. For example, Ohio would appear as OH.

The Date block should be completed with six digits. For example, March 9, 2005, would appear as 03 09 05.

A contribution received from a statewide PAC must list its registration number. A contribution from a Federal PAC may include the Federal PAC registration number. The registration number block may also be used to list that a contribution was received from a political contributing entity (PCE) or local PAC, both of which do not have a registration number.

The Employer/Occupation/Labor Organization block must be used by Statewide or General Assembly candidates when they have received individual contributions greater than \$100. If the contributor is self-employed, the occupation and the name of the individual's business, if any, rather than the employer, should be provided. However, all filers may use the block for contributions received in any amount from a partnership or unincorporated business when the name of the person as well as the business is required to be provided.

If public officeholders receive employee contributions relative to an event, the total should be transferred to this form from the Contributors in Officeholders' Employ form. In either case, the contribution should be counted only once.

At the bottom of the fund-raising form is a place to summarize the monetary activity of the event. Only one set of these "summary boxes" should be completed per event during a reporting period. Place the total of all the money received relative to that particular event during the reporting period in the first box. The total contributions received during the event should be transferred to the Statement of Contributions Received (Form 31-A) along with the date of the event. The second box should list the total of the money spent on that event during the reporting period.



**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> Friends of Shorter Griffin				
Full Name of Contributor Cheryl Hanzel			Registration Number, if PAC	
Street Address 619 E Cassell AVE	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 20.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor John F Galonski			Registration Number, if PAC	
Street Address 1137 Allendale Ave	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 100.00
City Akron	State OH	Zip Code 44306	Form (Cash, Check, Etc) Check	
Full Name of Contributor Elizabeth B Wilson			Registration Number, if PAC	
Street Address 791 N Azalea Blvd	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 75.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Friends of William Judge			Registration Number, if PAC	
Street Address 476 E State ST	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 500.00
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Joseph M Stefan			Registration Number, if PAC	
Street Address 3646 Woodlawn Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/27/19	Amount 40.00
City Norton	State OH	Zip Code 44203	Form (Cash, Check, Etc) 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 \$ 735.00

Division of the Department of the Interior  
Bureau of Land Management

Section	Township	Range
1	10N	10E
2	10N	10E
3	10N	10E
4	10N	10E
5	10N	10E
6	10N	10E
7	10N	10E
8	10N	10E
9	10N	10E
10	10N	10E
11	10N	10E
12	10N	10E
13	10N	10E
14	10N	10E
15	10N	10E
16	10N	10E
17	10N	10E
18	10N	10E
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61	10N	10E
62	10N	10E
63	10N	10E
64	10N	10E
65	10N	10E
66	10N	10E
67	10N	10E
68	10N	10E
69	10N	10E
70	10N	10E
71	10N	10E
72	10N	10E
73	10N	10E
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89	10N	10E
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93	10N	10E
94	10N	10E
95	10N	10E
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**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> Friends of Shorter Griffin				
Full Name of Contributor Joyce L Barron			Registration Number, if PAC	
Street Address 138 Norman	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) 06/27/19	Amount 40.00	
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Diane L Street			Registration Number, if PAC	
Street Address 649 Mesa Verde Dr.	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) 06/27/19	Amount 50.00	
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Patricia Zarle			Registration Number, if PAC	
Street Address 276 7th ST NW	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) 06/27/19	Amount 50.00	
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Sykes For Office			Registration Number, if PAC	
Street Address 133 Furnace Run Drive	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) 06/27/19	Amount 200.00	
City Akron	State OH	Zip Code 44203	Form (Cash, Check, Etc) Check	
Full Name of Contributor Paula M Kallio			Registration Number, if PAC	
Street Address 699 Wisteria Dr.	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) 06/26/19	Amount 75.00	
City Barberton	State OH	Zip Code 44203	Form (Cash, Check, Etc) 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 \$ 415.00

nov 1952 and continued to November 1953  
level of population of 10 islands is

DATE

ISLAND	NOV 1952	DEC 1952	JAN 1953	FEB 1953	MAR 1953	APR 1953	MAY 1953	JUN 1953	JUL 1953	AUG 1953	SEP 1953	OCT 1953	NOV 1953
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**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> Friends of Shorter Griffin				
<b>Full Name of Contributor</b> Mike Moore			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 3394 E Tuscarawas Ave Ext		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 06/27/19
				<b>Amount</b> 75.00
<b>City</b> Barberton		<b>State</b> OH	<b>Zip Code</b> 44203	<b>Form (Cash, Check, Etc)</b> Cash
<b>Full Name of Contributor</b> Nina Angeloff			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 756 E Ford Ave		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 06/27/19
				<b>Amount</b> 50.00
<b>City</b> Barberton		<b>State</b> OH	<b>Zip Code</b> 44203	<b>Form (Cash, Check, Etc)</b> Cash
<b>Full Name of Contributor</b> Contributions of cash under \$25.00			<b>Registration Number, if PAC</b>	
<b>Street Address</b>		<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 06/27/19
				<b>Amount</b> 140.00
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Form (Cash, Check, Etc)</b> cash
<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>
<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>

\* 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 \$ 265.00



1. Die folgenden Aussagen sind wahr oder falsch?  
a) Die Nullmatrix ist invertierbar.

Antwort: Falsch

b) Die Nullmatrix ist idempotent.

Antwort: Wahr

c) Die Nullmatrix ist symmetrisch.

Antwort: Wahr

2. Gegeben sei die Matrix  $A = \begin{pmatrix} 1 & 2 \\ 3 & 4 \end{pmatrix}$ .

a)

Bestimmen Sie  $A^{-1}$ .

b) Berechnen Sie  $A^2$ .

Antwort:  $\begin{pmatrix} 7 & 10 \\ 15 & 16 \end{pmatrix}$

c)

Berechnen Sie  $\det(A)$ .

Antwort:  $-1$

3. Gegeben sei die Matrix  $A = \begin{pmatrix} 1 & 2 & 3 \\ 4 & 5 & 6 \\ 7 & 8 & 9 \end{pmatrix}$ .

a)

Bestimmen Sie  $\det(A)$ .

b)

Berechnen Sie  $\det(A^T)$ .

c) Berechnen Sie  $\det(A^{-1})$ .

Antwort:  $-\frac{1}{\det(A)}$

d) Berechnen Sie  $\det(A^2)$ .

Antwort:  $(\det(A))^2$

4. Gegeben sei die Matrix  $A = \begin{pmatrix} 1 & 2 & 3 \\ 4 & 5 & 6 \\ 7 & 8 & 9 \end{pmatrix}$ .

a) Berechnen Sie  $\det(A)$ .

b) Berechnen Sie  $\det(A^T)$ .

5. Gegeben sei die Matrix  $A = \begin{pmatrix} 1 & 2 & 3 \\ 4 & 5 & 6 \\ 7 & 8 & 9 \end{pmatrix}$ .

a) Berechnen Sie  $\det(A)$ .

b)

c)

Antwort:  $0$

6. Gegeben sei die Matrix  $A = \begin{pmatrix} 1 & 2 & 3 \\ 4 & 5 & 6 \\ 7 & 8 & 9 \end{pmatrix}$ .

a)

Berechnen Sie  $\det(A)$ .

b)

Berechnen Sie  $\det(A^T)$ .

c)

Berechnen Sie  $\det(A^{-1})$ .

d)

Berechnen Sie  $\det(A^2)$ .



**Statement of Loans Received**

Form 31-C  
R.C. 3517.10

<b>Full Name of Committee</b> Friends of Shorter Griffin					
<b>From Whom Received</b> Shorter Griffin				<b>Prior Amount</b>	<b>Amt. Incurred this Period</b>
<b>Street Address</b> 225 Stanley Ave					<b>Outstanding Balance</b> 6720.00
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Loans Received This Period</b>		<b>Payments This Period</b>
<b>Date Loan was Originally Incurred (MM/DD/YYYY)</b> 05/23/19		<b>Date of Loan (MM/DD/YYYY)</b> 05/23/19	<b>Amount</b> 1720.00	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b> 0.00
<b>Registration Number, if PAC</b>		<b>Date of Loan (MM/DD/YYYY)</b> 06/04/19	<b>Amount</b> 5000.00	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b> 0.00
<b>Employer/Occupation/Labor Organization*</b>		<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b> 0.00
<b>From Whom Received</b>				<b>Prior Amount</b>	<b>Amt. Incurred this Period</b>
<b>Street Address</b>					<b>Outstanding Balance</b>
<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Loans Received This Period</b>		<b>Payments This Period</b>
<b>Date Loan was Originally Incurred (MM/DD/YYYY)</b>		<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Registration Number, if PAC</b>		<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Employer/Occupation/Labor Organization*</b>		<b>Date of Loan (MM/DD/YYYY)</b>	<b>Amount</b>	<b>Date of Payment (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)]

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 31-A-2). Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Outstanding Balance to the Cover page (Form No. 30-A).

Total Prior Amount \$ 6720.00

Total Received This Period \$ 0.00 (also record on Form 31-A-2)

Total Payments Received this Period \$ 0.00 (also record on Form 31-B)

Total Outstanding Balance \$ 6720.00 (also record on Form 30-A)

1. The first part of the document is a list of items, including:
 

- 1. The first part of the document is a list of items, including:
- 2. The second part of the document is a list of items, including:
- 3. The third part of the document is a list of items, including:

<p>1. The first part of the document is a list of items, including:</p>	<p>2. The second part of the document is a list of items, including:</p>	<p>3. The third part of the document is a list of items, including:</p>
<p>4. The fourth part of the document is a list of items, including:</p>	<p>5. The fifth part of the document is a list of items, including:</p>	<p>6. The sixth part of the document is a list of items, including:</p>
<p>7. The seventh part of the document is a list of items, including:</p>	<p>8. The eighth part of the document is a list of items, including:</p>	<p>9. The ninth part of the document is a list of items, including:</p>
<p>10. The tenth part of the document is a list of items, including:</p>	<p>11. The eleventh part of the document is a list of items, including:</p>	<p>12. The twelfth part of the document is a list of items, including:</p>
<p>13. The thirteenth part of the document is a list of items, including:</p>	<p>14. The fourteenth part of the document is a list of items, including:</p>	<p>15. The fifteenth part of the document is a list of items, including:</p>
<p>16. The sixteenth part of the document is a list of items, including:</p>	<p>17. The seventeenth part of the document is a list of items, including:</p>	<p>18. The eighteenth part of the document is a list of items, including:</p>
<p>19. The nineteenth part of the document is a list of items, including:</p>	<p>20. The twentieth part of the document is a list of items, including:</p>	<p>21. The twenty-first part of the document is a list of items, including:</p>



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Friends of Shorter Griffin			
<b>To Whom Paid</b> Summit County Democratic Party		<b>Date (MM/DD/YYYY)</b> 06/24/19	<b>Amount</b> 300.00
<b>Street Address</b> 438 Grant St		<b>Purpose</b> Donation	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44311	<b>Check Number</b> 1501
<b>To Whom Paid</b> Invictus LLP		<b>Date (MM/DD/YYYY)</b> 06/27/19	<b>Amount</b> 1,600.00
<b>Street Address</b> 112 Franklin St		<b>Purpose</b> Political & Public Consulting	
<b>City</b> Clarksville	<b>State</b> TN	<b>Zip Code</b> 37040	<b>Check Number</b> 1503
<b>To Whom Paid</b> Barberton Print Craft		<b>Date (MM/DD/YYYY)</b> 07/01/19	<b>Amount</b> 236.44
<b>Street Address</b> 520 Wooster Rd W		<b>Purpose</b> T Shirts	
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1504
<b>To Whom Paid</b> Friends of Tavia Galonski		<b>Date (MM/DD/YYYY)</b> 07/06/19	<b>Amount</b> 35.00
<b>Street Address</b> 1137 Allendale Ave		<b>Purpose</b> Donation	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44306	<b>Check Number</b> 1505
<b>To Whom Paid</b> Invictus LLP		<b>Date (MM/DD/YYYY)</b> 07/18/19	<b>Amount</b> 2,000.00
<b>Street Address</b> 112 Franklin St		<b>Purpose</b> Political & Public Affairs Consulting	
<b>City</b> Clarksville	<b>State</b> TN	<b>Zip Code</b> 37040	<b>Check Number</b> 1506

Page Total \$ 4171.44



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Friends of Shorter Griffin			
<b>To Whom Paid</b> K E M Printing		<b>Date (MM/DD/YYYY)</b> 07/23/19	<b>Amount</b> 25.00
<b>Street Address</b> 564 W Tuscarawas Ave		<b>Purpose</b> Printing Services	
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1507
<b>To Whom Paid</b> Barberton Community Foundation		<b>Date (MM/DD/YYYY)</b> 07/24/19	<b>Amount</b> 100.00
<b>Street Address</b> 460 W Paige Ave		<b>Purpose</b> Donation	
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1508
<b>To Whom Paid</b> A List Promotions		<b>Date (MM/DD/YYYY)</b> 07/30/19	<b>Amount</b> 1,063.23
<b>Street Address</b> 1532 E Market St		<b>Purpose</b> Signs	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44305	<b>Check Number</b> 1509
<b>To Whom Paid</b> B L T		<b>Date (MM/DD/YYYY)</b> 08/02/19	<b>Amount</b> 101.41
<b>Street Address</b> 564 W Tuscarawas Ave		<b>Purpose</b> Printing Services	
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1510
<b>To Whom Paid</b> City of Barberton		<b>Date (MM/DD/YYYY)</b> 08/05/19	<b>Amount</b> 150.00
<b>Street Address</b> 576 W Park Ave		<b>Purpose</b> Permit	
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1511

Page Total \$ 1,439.64

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**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Friends of Shorter Griffin			
<b>To Whom Paid</b> Barberton Printcraft		<b>Date (MM/DD/YYYY)</b> 08/06/19	<b>Amount</b> 63.00
<b>Street Address</b> 520.Wooster Rd W		<b>Purpose</b> T Shirts	
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1512
<b>To Whom Paid</b> B L T		<b>Date (MM/DD/YYYY)</b> 08/23/19	<b>Amount</b> 101.41
<b>Street Address</b> 564 W Tuscarawas Ave		<b>Purpose</b> Printing Services	
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1516
<b>To Whom Paid</b> City of Barberton		<b>Date (MM/DD/YYYY)</b> 08/23/19	<b>Amount</b> 50.00
<b>Street Address</b> 500 W Hopocan Ave		<b>Purpose</b> Parade fee	
<b>City</b> Barberton	<b>State</b> OH	<b>Zip Code</b> 44203	<b>Check Number</b> 1515
<b>To Whom Paid</b> P N C Bank		<b>Date (MM/DD/YYYY)</b> 08/01/19	<b>Amount</b> 21.00
<b>Street Address</b> 3379 Manchester Rd		<b>Purpose</b> Bank fees	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44319	<b>Check Number</b> Deducted
<b>To Whom Paid</b> P N C Bank		<b>Date (MM/DD/YYYY)</b> 06/20/19	<b>Amount</b> 19.99
<b>Street Address</b> 3379 Manchester Rd		<b>Purpose</b> Checks	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44319	<b>Check Number</b> Deducted

Page Total \$ 255.40



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> Friends of Shorter Griffin			
<b>To Whom Paid</b> Invictus LLP		<b>Date (MM/DD/YYYY)</b> 05/23/19	<b>Amount</b> 1600.00
<b>Street Address</b> 112 Franklin St		<b>Purpose</b> Political & Public Consulting	
<b>City</b> Clarksville	<b>State</b> TN	<b>Zip Code</b> 37040	<b>Check Number</b> 3378607 bank check
<b>To Whom Paid</b> TRI COUNTY REGIONAL LABOR COUNCIL		<b>Date (MM/DD/YYYY)</b> 05/23/19	<b>Amount</b> 120.00
<b>Street Address</b> 720 Wolf Ledges		<b>Purpose</b> Awards Dinner Donation	
<b>City</b> Akron	<b>State</b> OH	<b>Zip Code</b> 44311	<b>Check Number</b> 3378607 bank check
<b>To Whom Paid</b> "Expenditures from form 31-F"		<b>Date (MM/DD/YYYY)</b> 06/27/19	<b>Amount</b> 176.87
<b>Street Address</b>		<b>Purpose</b>	
<b>City</b>	<b>State</b> OH	<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> OH	<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> OH	<b>Zip Code</b>	<b>Check Number</b>

Page Total \$ 1896.87



№ п/п	Имя	Отчество	Дата рождения	Место рождения	Образование	Служба	Звание	Служба	Звание
1	Иван	Иванов	1890	С. 100	Среднее	Инженер	1-й разряд	Инженер	1-й разряд
2	Петр	Петров	1895	С. 100	Среднее	Инженер	2-й разряд	Инженер	2-й разряд
3	Александр	Александров	1900	С. 100	Среднее	Инженер	3-й разряд	Инженер	3-й разряд
4	Сергей	Сергеев	1905	С. 100	Среднее	Инженер	4-й разряд	Инженер	4-й разряд
5	Василий	Васильев	1910	С. 100	Среднее	Инженер	5-й разряд	Инженер	5-й разряд
6	Михаил	Михайлов	1915	С. 100	Среднее	Инженер	6-й разряд	Инженер	6-й разряд
7	Дмитрий	Дмитриев	1920	С. 100	Среднее	Инженер	7-й разряд	Инженер	7-й разряд
8	Андрей	Андреев	1925	С. 100	Среднее	Инженер	8-й разряд	Инженер	8-й разряд
9	Николай	Николаев	1930	С. 100	Среднее	Инженер	9-й разряд	Инженер	9-й разряд
10	Павел	Павлов	1935	С. 100	Среднее	Инженер	10-й разряд	Инженер	10-й разряд