

# **Ohio Campaign Finance Report**

Form 30-A

ORC 3517.10

Committee Name		Office Sought				
riends for John R. Hamercheck Election Committee		County Commissioner			Lake	
treet Address	State Zip					
W. Main Street	in Street Madison					
andidate Name OR PAC Registration Number	ne				MM/DD/YYYY)	
ohn R. Hamercheck	ett			11/08/2016		
ype of Report (choose one):						
Annual Demiannual Pre-Primary	/ Post-l	Primary Pre	-Genera	I 🗌 I	Post-General	
statewide Candidates Only:						Year
July Monthly	eptember Mo	nthly				/
mended Report Termination		Short Form Ro	eport (R	.C. 351	7.10(H))	
No					nittee is filing a	
wishes to terminate wi	th this report	short term	report. S	See atta	ched instructions	5.
1. Amount brought forward from last report	:		\$1	3,030.3	88	80 20
2. Total monetary contributions (From Form	s 31-A and 3	1-E)		BOARD 2018 JAI		
3. Total other income (From Form 31-A-2)		\$0.00				
4. Total funds available (sum of lines 1, 2, 3)		\$13,030.38			- E	
5. Total monetary expenditures (From Forms	<b>-</b> F)	\$165.67			OF ELECTION  131 AM 9: 2	
6. Balance on hand (line 4 minus line 5)			\$1	2,647.7	1	0NS
7. Value of in-kind contributions received (F	From Form 31	-J-1)		\$0.00		
8. Value of in-kind contributions made (From	m Form 31-J-	2)		RECEIPT ENTERED AMEND LTR		
9. Outstanding loans owed by committee (F	rom Form 31	-C)	\$84,500.00			
10. Outstanding debts owed by committee	(From Form 3	1-N)				
11. Outstanding loans owed to committee (	From Form 3	1-K)	\$0.00			SCAN AUD COMP
12. Value of independent expenditures made	n 31-U)		\$0.00		NNED DITED _	
THIS STATEMENT IS MADE UNDER PENAL WHOEVER COMMITS ELECTION FALSIFICA				HE FIF	TH DEGREE.	
Signature of Treasurer or Deputy Treasurer	outy I	easurer		01/31/ Date (N	/2018 MM/DD/YYYY)	
Contribution Pages 0 Expenditure Pages 1	Othe 7	er Pages	Total P	ages	Last (	Jpdated 09/2017





# **Statement of Expenditures**

Form 31-B

R.C. 3517.10

Full Name of Committee				-	
Friends for John R. Hamercheck Election Committee					
To Whom Paid			Date (MM/DD/YYYY)		Amount
Coranachio for Judge	07/20/2017		50.00		
Street Address	Purpose				
38046 Second St.	Fundraiser				
City	State	Zip	Code	eck Number	
Willoughby	ОН	440	)94	154	49
To Whom Paid			Date (MM/DD/YYYY)		Amount
Perkins Restaurant			09/11/20	)17	35.67
Street Address	Purpose				
700 Mentor Ave.	Campaign N	/lee	ting		
City	State	Zip	Code	Che	ck Number
Painesville	ОН	440	)77	Ca	rd
To Whom Paid	•		Date (MM/DD/YYYY)		Amount
Lake Humane Society			10/21/20	)17	80.00
Street Address	Purpose				
7564 Tyler Blvd. #E	Fundraiser				
City	State	Zip	Code		ck Number
Mentor	ОН	440	4060 15		52
To Whom Paid			Date (MM/DD/YYYY)		Amount
Street Address	Purpose				
City	State	Zip	Code	Che	ck Number
	ОН				
To Whom Paid			Date (MM/DD/YYYY)		Amount
Street Address	Purpose				
City	State	Zip	Code	Che	eck Number
	ОН		· · · · · ·		

Page Total \$	165.67	
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#### **Statement of Loans Received**

Form 31-C

R.C. 3517.10

Full Name of Committee						
Friends for John R. Hamerol	book Ele	ation Committe	20			
	TIECK LIE		<del></del>			
From Whom Received					Prior Amount	Amt. Incurred this Period
John R. Hamercheck					\$16,000.00	\$0.00
Street Address						Outstanding Balance
81 Parkway Blvd.						\$16,000.00
City	State	Zip Code				
Madison	ОН	44057	Loans Received Th	nis Period	Payment	s This Period
Date Loan was Originally I	ncurred (N	/M/DD/YYYY)	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/D	DD/YYYY) Amount
		01/09/2012				
Registration Number, if PAC			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/D	DD/YYYY) Amount
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/D	D/YYYY) Amount
			* s.	and the second second		
From Whom Received					Prior Amount	Amt. Incurred this Period
John R. Hamercheck					\$4,000.00	\$0.00
Street Address						Outstanding Balance
81 Parkway Blvd.						\$4,000.00
City	State	Zip Code			1 / 1	
Madison	ОН	4405	Loans Received Th	nis Period	Payment	s This Period
Date Loan was Originally I	ncurred (N	/M/DD/YYYY)	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/D	D/YYYY) Amount
02/23/2012						
Registration Number, if PAC			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/D	DD/YYYY) Amount
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM/D	DD/YYYY) Amount

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 \$ 20,000.00	
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 \$ 20,000.00	(also record on Form 30-A)

<sup>\*</sup> 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 Loans Received**

Form 31-C

R C 3517 10

Crianda for John D	Hamarahaak El	antian Camanit	to a				
Friends for John R.	Hamercheck El	ection Commit	tee				
From Whom Received		Prior Amount	Amt. Incurred this Pe				
John R. Hamerchec	k	\$24,500.00	0.00				
Street Address						Outstanding Balance	
81 Parkway Blvd.						\$24,500.00	
City	State	Zip Code					
Madison	ОН	44057	Loans Received Ti	Loans Received This Period Paymen			
Date Loan was	Originally Incurred	(MM/DD/YYYY)	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM	I/DD/YYYY) Amount	
		05/22/201	2		1		
Registration Number, if P	AC		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM	I/DD/YYYY) Amount	
					1		
Employer/Occupation/Labor Organization*			Date of Loan (MM/DD/YYYY) Amount Date of Payment (		Date of Payment (MM	I/DD/YYYY) Amount	
From Whom Received					Prior Amount	Amt. Incurred this Pe	
John R. Hamerchec	k				\$20,000.00	\$0.00	
Street Address						Outstanding Balance	
81 Parkway Blvd.						\$20,000.00	
City	State	Zip Code					
Madison	ОН	44057	Loans Received Ti	nis Period	Paymei	nts This Period	
Date Loan was	Originally Incurred	(MM/DD/YYYY)	Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM	I/DD/YYYY) Amount	
	•						
Registration Number, if P	AC		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM	I/DD/YYYY) Amount	
Employer/Occupation/La	bor Organization*		Date of Loan (MM/DD/YYYY)	Amount	Date of Payment (MM	I/DD/YYYY) Amount	
		,	_	•	-	•	

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 \$ 44,500.00	
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 \$ 44,500.00	(also record on Form 30-A)





### **Statement of Loans Received**

orm 31-0

R.C. 3517.10

Full Name of Committee								$\neg$
Friends for John R. Hamero	heck Ele	ection Committe	ee					
From Whom Received						Prior Amount	Amt. Incurred this P	eriod
John R. Hamercheck						\$20,000.00	\$0.00	
Street Address							Outstanding Balance	е
81 Parkway Blvd.							\$20,000.00	
City Madison	State OH	Zip Code 44057	Loans Rec	eived TI	nis Period	Paymen	ts This Period	
Date Loan was Originally	Incurred (N	лим/DD/YYYY) 12/28/2015	Date of Loan (MM/D	DD/YYYY)	Amount	Date of Payment (MM/	DD/YYYY) Amount	$\neg$
Registration Number, if PAC			Date of Loan (MM/D	DD/YYYY)	Amount	Date of Payment (MM/	DD/YYYY) Amount	
Employer/Occupation/Labor Organ	nization*		Date of Loan (MM/D	DD/YYYY)	Amount	Date of Payment (MM/	DD/YYYY) Amount	
From Whom Received			I			Prior Amount	Amt. Incurred this P	eriod
a en la companya de								
Street Address							Outstanding Balance	е
City	State	Zip Code	Loans Rec	eived Th	nis Period	Paymen	ts This Period	
Date Loan was Originally	Incurred (N	MM/DD/YYYY)	Date of Loan (MM/D	DD/YYYY)	Amount	Date of Payment (MM/	DD/YYYY) Amount	
Registration Number, if PAC			Date of Loan (MM/D	DD/YYYY)	Amount	Date of Payment (MM/	DD/YYYY) Amount	
Employer/Occupation/Labor Organ	nization*		Date of Loan (MM/D	DD/YYYY)	Amount	Date of Payment (MM/	DD/YYYY) Amount	$\neg$
* Required for contributions from in name of the individual's business, i aggregate of \$100, the labor organ If a loan is forgiven, write "Forgiver (Form No. 31-A-2). Transfer total of Cover page (Form No. 30-A).	if any, rathe ization of v n" in the "O	er than employer so which the employee outstanding Balance	hould be listed. If two es are members, if an e" space. Transfer to	o or more eny, must all total	employees contrib so appear. [R.C. 3 ans received this p	ute via payroll deducti 3517.10(B)(4)] period to the Statemer	on and exceed the	
Total Prior Amount \$ 20,000	0.00							
Total Received This Period	\$0.00			(also reco	ord on Form 31-A-	-2)		
Total Payments Received th	his Perio	d \$ <u>0.00</u>		(also reco	rd on Form 31-B)			
Total Outstanding Balance	\$ 20,000	.00		(also reco	rd on Form 30-A)			