# **Statement of Contributions Received**

Page <u>43</u>

Prescribed by Secretary of State 03/05

Name of Committee in Full		
ANTHONY J. RUSSO FOR	Judge Committ	
Wohl for Berea Municipal		Registration Number, if PAC
Clerk of Courts Committee —	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
c/o Raymond Wohl 15256 White Oak Circle —		Check
Middleburg Hts., OH 44130	State Zip Code OH	030308 Amount 250.00
		Registration Number if PAC
Sal A. Catalano —	Employer/Occupation/Labor Organization*	Form (Cash, Check etc.)
6668 Duneden Avenue Solon, OH 44139 —		Check
	State Zip Code OH	M D Y Amount 250.00
West and the second		Registration Number, if PAC
William F. Florio, Sr. 10603 Glen Forest Trail Brecksville, OH 44141	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.) Check
Dictasvine, Off 44141	State Zip Code OH	M D Y Amount 250.00
7		Registration Number, if PAC
I homas E. Day — 4973 Pine Ridge Oval Independence, OH 44131 —	Employer/Occupation/Labor Organization	Form (Cash, Check, etc.)
macpenaence, Ori 44131 —	State Zip Code OH	M D Y Amount 250.00
		Registration Number if PAC
George J Sadd	*	Form (Cash, Check, etc.)
4126 Bushnell Road	Employer/Occupation/Labor Organization*  A TTO RNEY	Check
Cleveland, OH 44118	State Zip Code	M D Y Amount
	OH <sub>_</sub>	0 3 0 3 0 8 / 00 · 00  Registration Number, if PAC
Mantin I Syroanay for Council Committee		registratuit rumber, it i AC
Martin J. Sweeney for Council Committee 3612 W. 133 <sup>rd</sup> Street	Employer/Occupation/Labor Organization*	Form (Cash Check etc.)
Cleveland, OH 44111	2 1 7 2 1	Check
	State Zip Code OH	M D Y Amount 500.00
Degross for Mayor Committee		Registration Number, if PAC
Kevin Adelstein, Treasurer 376 Miles Road	Employer/Occupation/I abor Organization*	Form (Cash, Check, etc.)
Moreland Hills, OH 44022	State Zip Code	M D Y Amount
-	OH	030308 250.00
Citizens for Incorvaia Committee		Registration Number, if PAC
6490 Pebblecreek Drive Independence, OH 44131	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
	State Zip Code OH	M D Y Amount 250.00

Page Total 2,100.00

<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 Contributions Received**

Page <u>44</u>

Prescribed by Secretary of State 03/05

Name of Committee in Full  ANTHONY J. RUSSO FOR	Tudad	No man ++ 06	,	<del> </del>		
HNIHONY J. MUSSO FOR	Juage	COMMINITEE	Registration Number, if P	AC		
Michael L. Forlani						
797 Hanover Road	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)		
Gates Mills, OH 44040	g. b	lg: 0.1		Check		
	State OH	Zip Code	0 3 0 3 0 8	Amount 500:00		
Nicholas A. Papa			Registration Number, if P.	AC		
7560 SOM Center Road Solon, OH 44139	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)		
	State OH	Zip Code	030308	Atmount 100.00		
Prince M. C.			Registration Number, if P.	AC		
Bruce M. Courey, Esq 5580 Ridge Road	1 ~ -	pation/Labor Organization* TORNEY	,	Form (Cash; Check etc.)  Check		
Parma, OH 44129 —	State OH	Zip Code	M D Y O 3 O 8	Amount 250.00		
Friends of Brian Day			Registration Number, if P.			
1107 Meadowlawn Blvd Parma, OH 44134	Employer/Occu	pation/Labor Organization*	Form (Cash, Check, etc.) Chech			
	State OH	Zip Code	M D Y O 3 6 8	Chech Amount 250.00		
Thomas E. Day III			Registration Number, if PAC			
4973 Pine Ridge Oval Independence, OH 44131	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)  Chille		
	State OH,	Zip Code	0 3 0 3 0 S	Amount		
Friends to Elect Colonna			Registration Number, if Pa	AC		
13620 Dalebrook Avenue Brook Park, OH 44142	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)		
	State OH	Zip Code	M D Y O 3 0 8	Amount 250. v2		
Friends of Dean Depiero			Registration Number, if Pa	<b>√C</b>		
5580 Ridge Road Parma, OH 44129	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check		
(	State OH	Zip Code	M D Y O 3 0 8	Amount 1 50,00		
Joseph Russo		-	Registration Number, if Pa	AC		
26751 Skyline Drive Olmsted Falls, OH 44138	Employer/Occur Ju a			Form (Cash, Check, etc.)		
	State OH	Zip Code	030308	Amount 250,00		

Page Total 2,000.00

<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)]

### Page <u>45</u>

## **Statement of Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full  ANTHONY J. RUSSO FOR	Judas	No mm ++00	· ·				
ANTHONY S. VON 200 FOR	vacyc	COMMINITIE	Registration Number if l	PAC			
David A. Lambara, Ess							
David A. Lambros, Esq. — One Berea Commons, Ste. 216	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)			
Berea, OH 44017		Torney		Check			
	State OH	Zip Code	030308	Amount			
		——————————————————————————————————————	Registration Number if				
Friends of Sheriff McFaul							
33901 Reserve Way	Employer/Occu	pation/Labor Organization*	Form (Cash, Check, etc.)				
Avon, OH 44011	State	Zip Code	M D Y	Amount			
	OH		022908	Chech Amount 500,00			
	<u> </u>		Registration Number if				
Joseph F. Vinciguerra							
8265 Wright Road	Employer/Occu	pation/Labor Organization*	4.	Form (Cash, Check etc.):			
Broadview Hts., OH 44147	State	Zip Code	M D Y	Amount 250 00			
	OH	24 5000	030308	250 00			
			Registration Number, if)	PAC			
Friends of William D. Mason —		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
5114 Sassafras Drive	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)			
Parma, OH 44129	State	Zip Code	M D Y	Check Amount			
	OH	Zip code	030308	3			
<del>-</del>	,	1.	Registration Number, if I				
Steven W. Pumper							
8056 Majestic Oaks Trail	Employer/Occus	pation/Labor Organization*		Form (Cash, Check, etc.)			
Broadview Hts., OH 44147	State	Zip Code	M D Y	Amount			
	OH	nip cour	030208	Chech Amount 250.00			
<del>-</del>	1		Registration Number, if I				
Mark J. Stockman  Synthis Br Stockman							
1053 Maplecliffe	Employer/Occuj	pation/Labor Organization*		Form (Cash Check, etc.)			
Lakewood, OH 44107	State	Zip Code	M D Y	Check			
	OH	Zip code	022908	1			
			Registration Number, if I				
Mistalla							
Michael R. Vaselaney 12295 Wedgefield Ln.	Employer/Occuj	oation/Labor Organization*		Form (Cash, Check, etc.)			
Chesterland, OH 44026	State	Zip Code	M D Y	Check Amount			
,	OH	Zip code	022808				
N. II Kanin	<u> </u>		Registration Number, if I				
Neil Kurit Tower at Erieview —							
1301 East 9 <sup>th</sup> Street, Ste. 2600	Employer/Occup	oation/Labor Organization*		Form (Cash, Check, etc.)			
Cleveland, OH 44114 —	State	Zip Code	Mi bi vi	Amount			
	OH	Lap Code	022908				

Page Total 2,200. 00

<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)]

### Page 46

## **Statement of Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full  ANTHONY J. RUSSO FOR	Judge Committee	2)
Richard A. Rosner, Esq.		Registration Number, if PAC
2600 The Tower at Erie View	17.1 0 2.71.0	Form (Cash, Check, etc.)
1301 E. 9 <sup>th</sup> Street	Employer/Occupation/Labor Organization*	i i
Cleveland, OH 44114	ATTORNLY State Zip Code	Check
Cicvolana, Oir 44114	State Zip Code OH	022808 Amount 300,00
Elliott I. Resnick & Co., L.P.A.		Registration Number, if PAC
2101 Richmond Road	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
Beachwood, OH 44122		Cherk
Deachwood, On 44122	State Zip Code	M D Y Amount
	ОН	Chek  M D Y Amount  0 2 0 3 0 8 500.07  Registration Number, if PAC
Mar Contract		
Mrs. Gaytana Cosiano 155 Panorama Drive	Employer/Occupation/Labor Organization*	Form (Cash Check etc.) Check
Seven Hills, OH 44131	State Zip Code	M D Y Amount
	OH	0 2 1 5 0 8 100.00 Registration Number, if PAC
E		
Emmanuel C. Okafor, M.D. —	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
145 Murcott Circle	Doctor	check
Orange Village, OH 44022	State Zip Code	M D Y Amount 022/08/100.00
		Registration Number, if PAC
Angela G. Carlin	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
2820 Gibson Drive		Check
Rocky River, OH 44116 -	ATTORNEY State Zip Code	M D Y Amount
	OH	022508 200.00
		Registration Number, if PAC
Fanger Law Office LLC	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
600 Superior Ave., E., Ste 1300	LawFiRM	Check
Cleveland, OH 44114 -	State Zip Code	M D Y Amount
	OH	0 2 2 6 0 8 /00.00  Registration Number if PAC
Tucker Ellis & West LLP		Acgistration Number, if IAC
1150 Huntington Bldg.	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
925 Euclid Avenue	LAWFIRM	Check
Cleveland, OH 44115	State Zip Code	3.4 5 3.0
Olovomia, oli 11115	ОН	0 2 2 2 0 8 SOO. UZ
		Registration Number, if PAC
Albert E. Seymour, Jr. —	Employer/Occupation/Labor Organization*	Form (Cash, Check etc.)
2917 Kingsley Road		Check
Shaker Hts., OH 44122 –	State Zip Code	
	OH	0 2 1 5 0 8 200. N

Page Total 2,000-02

<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)]

# Page 47

# **Statement of Contributions Received**

Name of Committee in Full ANTHONY J. RUSSO FOR	Judge Committee				
Joseph T. Dirch		Registration Number, if PAC			
Tiaon Michele Lynch 12300 Spruce Pointe	Employer/Occupation/Labor Organization*	Form (Cash Check, etc.)			
Strongsville, OH 44149	State Zip Code OH	Check  M 2 2 8 0 8 Amount  So. 00  Registration Number, if PAC			
Charles Kampinski, Esq. —					
1370 Ontario Street, Ste. 1530 Cleveland, OH 44113	Employer/Occupation/Labor Organization*  ATTORNEY  State Ziff Code	Form (Cash, Check, etc.)  Check  Mi Di Vi Amount			
	State Ziff Code OH	022608 500.00			
Hermann, Cahn & Schneider, L.L.P.		Registration Number if PAC			
Attorneys at Law 1301 East Ninth Street, Ste. 500	Employer/Occupation/Labor Organization* LawFirm	Form (Cash: Check, etc.) Check			
Cleveland, OH 44114	State Zip Code OH	M D Y Amount 022708 1,000.00			
		Registration Number, if PAC			
Friends of Frankie Goldberg — 2344 Canal Road	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.) Chlck			
Cleveland, OH 44113 —	State Zip Code OH	M D Y Amount 030408 50.00			
F		Registration Number if PAC			
Michael P. Maloney, Esq. — 24441 Detroit Road, #300	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)			
Westlake, OH 44145 —	State Zip Code  OH	Check 0 3 0 8 100.00			
Valence I 1	l · · · · · ·	Registration Number, if PAC			
Kohrman Jackson & Krantz PLL PAC 1375 East Ninth Street	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc			
One Cleveland Center, 20 <sup>th</sup> Floor Cleveland, OH 44114	LAWFIRM State Zip Code	M D Y Amount			
<del>-</del>	ОН	0 3 0 6 0 8 300.00  Registration Number. if PAC			
Joseph A. Pfundstein, Esq. —	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.			
29325 Chagrin Blvd., #305 Beachwood, OH 44122 —	A TTORNEY State Zip Code	Check M D Y Amount			
	OH	030108 50,00			
Frances Coleman —		Registration Number, if PAC			
32745 Shadowbrook Drive Solon, OH 44139	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.) Chick			
501011, Of 1 44139	State Zip Code OH	M D Y Amount 500.00			

<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)]

### Page <u>48</u>

## **Statement of Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full		· · · · / / -	<i>-</i>					
ANTHONY J. RUSSO	-UR JURGE C	ommittee		ation Nur	nber if I	PAC		
Adam S. Baker, Esq. 55 Public Square, Ste. 1330	1	n/Labor Organization*		Form (Cash, Check, etc.)				
Cleveland, OH 44113	ATTO State OH	Zip Code	M O 2	D / 5	Y 0 8	Check Amount 25,00		
Patricia Soloman			Registr	ation Nur	nber, if I	PAC		
16818 Kenyon Road Shaker Hts., OH 44120		n/I abor Organization*				Form (Cash, Check, etc.)  Money or Den  Amount		
	OH,	Zip Code	M	D	Y	100.00		
Full Name of Contributor			Registra	ation Nur	nber, if F	PAC		
Street Address	Employer/Occupatio	n/I abor Organization*				Form (Cash, Check, etc.)		
City	State OH	Zip Code	M	D	Y	Amount		
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·		Registra	ation Nur	nber if F	AC		
Street Address	Employer/Occupation	n/Labor Organization*				Form (Cash, Check, etc.)		
City	State :	Zip Code	М	D	Y	Amount		
Full Name of Contributor		· ••••	Registra	ation Nun	nber, if P	AC		
Street Address	Employer/Occupation	n/Labor Organization*				Form (Cash, Check, etc.)		
City	State OH	Zip Cođe	M	D	Y	Amount		
Full Name of Contributor	<del></del>		Registra	ation Nun	nber, if P	AC		
Street Address	Employer/Occupation	n/Labor Organization*				Form (Cash, Check, etc.)		
City	State 2	Zip Code	М	D	Y	Amount		
Full Name of Contributor	I — managara a di		Registra	tion Nun	iber, if P	AC		
Street Address	Employer/Occupation	a/Labor Organization*				Form (Cash, Check, etc.)		
City	State 2	Zip Code	M	D	Y	Amount		
Full Name of Contributor			Registra	tion Nun	ber, if P.	AC		
Street Address	Employer/Occupation	n/Labor Organization*				Form (Cash, Check, etc.)		
City	State Z	Lip Code	М	D	Y	Amount		

Page Total /25.00

<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 Other Income**

Prescribed by Secretary of State 2/01

Name of Committee in Full Anthony J. Russo for Judge Committee	9					
Full Name Friends of Frank Russo - Transfer from state		eceived Form 31-C	Registration Number, if PAC			
Address	Type*	222.703 1 01111 01-0	M D Y Amount			
1128 Eastwood Avenue	RE	7'n Code	0 2 1 4 0 8 \$3,000.00 Form (Cash Check, etc.)			
City Mayfield Hts.	State OH	Zip Code 44124	check			
Full Name			Registration Number if PAC			
Patricia M. Russo - Transfer from statemen		ed Form 31-C				
Address	Type*		M D Y Amount			
883 Beechers Brook	RE	S. 0.	0 2 1 3 0 8 \$14,000.00			
City Mourfield	State OH	Zip Code	Form (Cash, Check, etc.)			
Mayfield Full Name	ГОП	44143	Registration Number, if PAC			
Patricia M Russo - Transfer from statemen		ed Form 31-C				
Address	Type*		M D Y Amount			
883 Beechers Brook	RE SIL	7: 0 1	0 2 1 5 0 8 \$10,000.00			
City Mayfield	State OH	Zip Code 44143	Form (Cash, Check etc.) Check			
Full Name	OII	1 44 (40	Registration Number if PAC			
Address	Type*		M D Y Amount			
City	RE State	Zin Code	Form (Cash, Check etc.)			
Caty	State OH	Zip Code	FORM (Cash, Check etc.)			
Full Name						
Address	Type*		M D Y Amount			
	RE		1.00			
City	State	Zip Code	Form (Cash, Check etc.)			
Fulf Name	OH		Registration Number, if PAC			
			-			
Address	Type*		M D Y Amount			
City	State	Zip Code	Form (Cash Check etc.)			
	OH					
Full Name			Registration Number, if PAC			
Address	Type*		M D Y Amount			
	RE					
City	State	Zip Code	Form (Cash Check etc )			
	OH					
Full Name			Registration Number if PAC			
Address	Type*		M D Y Amount			
	RE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
City	State	Zip Code	Form (Cash, Check, etc.)			
	OH					

27,000.00

Page Total \$

<sup>\*</sup> Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received. IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made

#### **Statement of Loans Received**

Page \_ 5 <del>'</del>

Prescribed by Secretary of State 3/05

From Whom Received							Prior Amo		· ·	Amt Incurred this Period	
Anthony J. Russo						\$11	,572.3	6	Outstanding Balance		
883 Beechers Brook											\$11,572.36
City Mayfield	St ate OH	Zip Code 44143		Loan Date	s Receiv	ed This Period	d mount		Pa Date	ayments	This Period Amount
Date Loan was originally Incurred	1 2	0 9 9 2	M.	D	<b>Y</b> :	\$		M	D	Y	\$
Registration Number, if PAC			M	D	Y			M	D	Y	
Employer/Occupation/Labor Organization	1*		М	D	Y			М	D	Y	
From Whom Received Anthony J. Russo					J			Prior Amo	00.00	-	Amt Incurred this Period
Address 883 Beechers Brook								No. ?			Outstanding Balance \$6,000.00
<sup>City</sup> <b>Mayfield</b>	St ate OH	Zîp Code 44143		Loan Date	s Receiv	ved This Perio	d mount	Payments This Period Date Amou			This Period Amount
Date Loan was originally Incurred	м 0 9	2 4 0 4	M	D	Y	\$		M	D <sub>i</sub>	Y	\$
Registration Number, if PAC		· · · · · · · · · · · · · · · · · · ·	М	D	Y			М	D.	Y	
Employer/Occupation/Labor Organization	1*		M	D	Y			M	D.	Y	
From Whom Received Anthony J. Russo				F	1		· · · · · · · · · · · · · · · · · · ·	Prior Amo	000.00	)	Amt. Incurred this Period
Address 883 Beechers Brook											Outstanding Balance \$0.00
<sup>City</sup> Mayfield	St ate OH	Zip Code 44143	Loans Received This Period Date Amount				P Date	ayments	This Period Amount		
Date Loau was originally Incurred	1 2	0 5 0 7	М	D:	Y	\$		м 0 3	3 1	0 8	\$ \$5,000.00
Registration Number if PAC	I	·	М	D	Y			M	D	Y	
Employer/Occupation/Labor Organization	ı*		M	D	Y	1		M	D	Y.	

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).

<sup>1</sup> Total prior amount \$\$22	,572.36	
<sup>2</sup> Total received this period \$	7,000.00	(To Form No. 31-A-2)
<sup>3</sup> Total payments this period \$	\$5,000.00	(To Form No 31-B)
<sup>4</sup> Total Outstanding Balance \$	\$44,572.36	(To Form No. 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)]

# Page <u>55</u>

### **Statement of Loans Received**

Prescribed by Secretary of State 3/05

					,						
Full Name of Committee											
Anthony J. Russo for Ju	dge Co	mmitte	e								
*****								Prior Am	ount		Amt. Incurred this Period
Friends of Frank Russo											\$3,000.00
Address											Outstanding Balance
1128 Eastwood Avenu	е										\$3,000.00
City St ate Zip Code											This But a
Mayfield Hts.	OH	44124	ļ	D	Loan: ate	s Keceive	ed This Period Amount		Date	ayments	This Period Amount
	M	D	Y	М	D	Y	\$	M	D	Y	\$
Date Loan was	0 2	1 4	0 8						!		
originally Incurred		l		M	D :	Y		M	D	Y	
Registration Number if PAC				141		1		141	"	, *:	
					<u> </u>	7.			<u> </u>	3.5	
Employer/Occupation/Labor Organization	ı <b>*</b>			M	D	Y		M	D	Y	
From Whom Received				<del></del>	1	<u> </u>		Prior Am	ount		Amt. Incurred this Period
Patricia M. Russo											\$24,000.00
Address 883 Beechers Brook											Outstanding Balance \$24,000.00
City	St ate	Zip Code									~~ .
Mayfield	OH	44143	3	_	Loan ate	s Receiv	ed This Period Amount		P Date	ayments	This Period Amount
	M	Di	Y	M	D	Y	\$	M	Date	Y	\$
Date Loan was originally Incurred	0 2	1 3	0 8	0 2	1 3	8 0	\$14,000.00	<u>:</u>	:		
Registration Number if PAC				М	D	Y	\$10,000,00	M	D:	Y	
				0 2	1 5	0 8	\$10,000.00			:	1
Employer/Occupation/L abor Organization	1*			М	D	Y		М	D	Y	
						:					
From Whom Received		***					-	Prior An	ount	•	Amt Incurred this Period
							· · · · · · · · · · · · · · · · · · ·				
Address											Outstanding Balance
City	St ate	Zip Code									
	ОН			_	Loan ate	s Receiv	ed This Period Amount		P Date	ayments	This Period Amount
	M	D	Y	M	D	Y	\$	M	Date	Y	\$
Date Loan was	<del>_</del>	-:									
originally Incurred	١	<u> </u>	<u> </u>	<u> </u>						<u> </u>	
Registration Number, if PAC				M	D	Y		M	D <sub>i</sub>	Y	
Employer/Occupation/Labor Organization	1*			M	D	Y		M	D	Y	
	-							-			
* Required for contributions from inc	lividuals c	ver \$100	to statewic	le and ge	neral as	sembly	candidates. If contrib	utor is self	-employe	d the oc	cupation and the name of

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).

<sup>1</sup> Total prior amount \$		
<sup>2</sup> Total received this period \$	\$27,000.00	(To Form No. 31-A-2)
<sup>3</sup> Total payments this period \$_	5,000.00	(To Form No. 31-B)
<sup>4</sup> Total Outstanding Balance \$ _	44,572.36	(To Form No 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)]

# Page <u>56</u>

## **In-Kind Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full Anthony J. Russo for Judge Committee			
Full Name of Contributor	Employer Occur	pation Labor Organization*	Registration Number, if PAC
Boyko & Dobeck	1	s at Law	
Street Address	Description of Ite	•	M D Y Fair Market Value
6741 Ridge Road		- Corleones	0 3 0 3 0 8 \$260.00
City	Sta te OH	Zip Code 44129	Received at Fundraising Event?
Parma Full Name of Contributor		pation, Labor Organization*	Registration Number, if PAC
John Spellacy	Employer, Occup	pation, Labor Organization	Registration (Milliott, II 1 AC
Street Address	Description of Ite	m or Service	M D Y Fair Market Value
2167 Savannah	Tips - Cor		0 3 0 3 0 8 \$40.00
City	Sta te	Zip Code	Received at Fundraising Event?
Westlake	OH	44145	©YES ONO
Full Name of Contributor	Employer, Occup	pation, Labor Organization*	Registration Number, if PAC
FRIENDS OF FRANK RUSSO			
Street Address	Description of Ite		M D Y Fair Market Value
1128 EASTWOOD AVENUE		workers	030408 42,000,00
City	Sta te	Zip Code	Received at Fundraising Event?
MAYField	OH	44124	(C) YES (C) NO
Full Name of Contributor	Employer Occur	pation Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite		M D Y Fair Market Value
City	Stal te OH	Zip Code	Received at Fundraising Event?  OYES  NO
Full Name of Contributor		pation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite	em or Service	M D Y Fair Market Value
City	Stal te OH	Zip Code	Received at Fundraising Event?
			OYES ONO
Full Name of Contributor	Employer Occu	pation Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite	em or Service	M D Y Fair Market Value
City	Stal te	Zip Code	Received at Fundraising Event?
	OH		O YES O NO
Full Name of Contributor	Employer, Occu	pation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite	em or Service	M D Y Fair Market Value
City	Stal te Zip Code		Received at Fundraising Event?  © YES  NO
Full Name of Contributor	Employer Occu	pation Labor Organization*	Registration Number if PAC
Street Address	Description of Its	em or Service	M D Y Fair Market Value
City	Stal te OH	Zip Code	Received at Fundraising Event?  OYES  NO

Page Total 2,300.00

<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and 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**



nmittee			
		M D Y Amount	一,
		0 2 1 8 0 8 \$332.95	'
Purpose			
	Zin Code	Chack Number	
OH	44115	1029	
		0 2 1 4 0 8 **S205.00	V
Purpose stamps			
State OH	Zip Code 44124	Check Number 1061	
		0 2 1 4 0 8 S50,000 0	00 V
Purpose advertisi	ng		
OH State	Zip Code 44132	Check Number 1026	
		0 2 1 4 0 8 Amount \$40,000.6	00
Purpose advertisi	ng		
State OH	Zip Code 44132	Check Number 1028	
		0 2 1 9 0 8 \$104.00	V
Purpose stamps			
OH State	Zip Code 44124	Check Number 1031	
		0 2 2 1 0 8 \$130.00	ı
Purpose stamps			
OH State	Zip Code 44124	Check Number 1034	
		M D Y Amount 0 2 2 0 0 8 \$425.00	V
Purpose Ad			
State OH	Zip Code 44122	Check Number	
		M D Y Amount 0 2 2 5 0 8 \$5,000.00	1
State OH	Zip Code 44132	Check Number 1042	
	Purpose stamps State OH  Purpose stamps State OH  Purpose advertisi State OH  Purpose stamps State OH	Purpose   Printing     State	Purpose   Printing   State   Zip Code   OH   44115   Check Number   1029   T   4   0   8   \$332.95

Page 51

	Prescribed by Secre	etary of State 2/01			_
Name of Committee in Full Anthony J. Russo for Judge Co	ommittee			· ———	
To Whom Paid			M D Y 0 2 2 1 0 8	Amount \$5,000.00	٦Į
Burges & Burges	Purpose		0 2 2 1 0 0	ψ0,000.00	$\dashv$
26100 Lake Shore Blvd.	Advertis				
City Cleveland	State OH	Zip Code 44132	Check Number 1037		
To Whom Paid Burges & Burges			0 2 2 1 0 8	Amount \$15,000.00	
Address 26100 Lake Shore Blvd.	Purpose Advertis	ing			
City Cleveland	State OH	Zip Code 44132	Check Number 1035		
To Whom Paid Friends of Jackie Gallagher for (	Council		0 2 2 2 0 8	Amount \$60.00	brace
Address 1533 E. 195th Street	Purpose Fundrais	er		i.	
City <b>Euclid</b>	State OH	Zip Code 44117	Check Number 1039		
To Whom Paid Ohio Democratic Party			0 2 1 5 0 8	Amount \$20,607.19	7
Address 340 E. Fulton Street	Purpose Campaiç	jn mailer			
City Columbus	State OH	Zip Code 43215	Check Number 1027		
To Whom Paid Gallucci's			0 2 2 5 0 8	Amount \$76.87	į
Address 6610 Euclid Avenue	Purpose Food iten	ns			
<sup>City</sup> Cleveland	OH State	Zip Code	Check Number 1043		
To Whom Paid Ohio Democratic Party			0 2 2 0 8	Amount \$6,411.32	l
Address 340 E. Fulton Street	Purpose Campaig	n mailer			
City Columbus	State OH	Zip Code 43215	Check Number 1038		
To Whom Paid Euclid Democratic Club			0 2 1 9 0 8	Amount 3 \$400.00	Ju
Address P.O. Box 32423	Purpose Sample b	pallot			
City Euclid	State OH	Zip Code 44132	Check Number 1030	NEW Y	
To Whom Paid Parma Democratic Club	•		M D Y 0 2 0 0 8	Amount \$2,000.00	7
Address 3023 Standish Avenue	Purpose Sample k	pallot	•	•	
City Parma	State OH	Zip Code 44134	Check Number 1032		
				the state of the s	

# **Statement of Expenditures**

Page 52

Name of Committee in Full	reached by beer	only or out 25 of		
Anthony J. Russo for Judge Com	nmittee			
o Whom Paid Lakewood Democratic Club			M D Y Amount 3400.00	
Address 1269 Overlook Road	Purpose Sample	hallot		
City Lakewood	State OH	Zip Code 44107	Check Number 1040	
To Whom Paid Brook Park Democratic Club			M D Y Amount 0 2 2 6 0 8 \$400.00	
Address 6145 Michael Drive	Purpose Sample	hallot	<b>3.2 2.0 3.0</b>	
City Brook Park	State OH	Zip Code 44142	Check Number	
To Whom Paid Parma Hts. Democratic Club			M D Y Amount 0 2 6 0 8 \$400.00	
Address 6841 Commonwealth Avenue	Purpose Sample	ballot		
City Parma Hts.	State OH	Zip Code 44130	Check Number 1045	
To Whom Paid Friends of Cyril Kleem			M D Y Amount 0 2 6 0 8 \$400.00	
Address 668 Wyleswood Drive	Purpose Sample	Purpose Sample ballot		
City Berea	State OH	Zip Code 44017	Check Number 1046	
O Whom Paid Democratic Club of Brooklyn			M D Y Amount 0 2 6 0 8 \$500.00	
Address 4804 Roadoan Road	Purpose Sample b	pallot		
City Brooklyn	OH State	Zip Code 44144	Check Number 1052	
To Whom Paid Qwestcom Graphics	*	0 2 2 6 0 8 Amount \$1,000.00		
Address 4560 State Road, Ste. C	Purpose Clevelan	d Hts. sample ballo	ot	
City Cleveland	State OH	Zip Code 44109	Check Number 1048	
To Whom Paid The Garfield Heights Democratic	Club	•	M D Y Amount 0 2 2 6 0 8 \$600.00	
Address 13908 York Blvd	Purpose Sample I	pallot		
City Garfield Hts.,	State OH	Zip Code 44125	Check Number 1049	
To Whom Paid North Royalton Democratic Club	'		M D Y Amount 0 2 2 6 0 8 \$500.00	
Address 16780 Ridge Road	Purpose Sample I	Purpose Sample ballot		
City North Royalton	State OH	Zip Code 44133	Check Number 1050	

# **Statement of Expenditures**

Name of Committee in Full				
Name of Committee in Full Anthony J. Russo for Judge Co	mmittee			
To Whom Paid  Qwestcom Graphics, Inc.			0 2 2 6 0 8	Amount \$662.66
Address 4560 State Road, Ste. C	Purpose Yard sig	Purpose Yard signs		•
City Cleveland	State OH	Zip Code 44109	Check Number 1051	
To Whom Paid PAS Publishing Co. (LaGazzetta	)		M D Y 0 3 0 1 0 8	Amount \$300.00
Address P.O. Box 222	Purpose Ad			•
City Hudson	State OH	Zip Code 44236	Check Number 1054	
To Whom Paid Burges & Burges			M D Y 0 2 2 8 0 8	Amount \$3,000.00
Address 26100 Lake Shore Blvd.	Purpose Advertis	ing	:::	
City Cleveland	State OH	Zip Code 44132	Check Number 1053	
To Whom Paid DelSangro's	1	············	0 3 0 3 0 8	Amount \$272.00
Address 13450 Snow Road	Purpose Campaign luncheon			
<sup>City</sup> Cleveland	State OH	Zip Code	Check Number 1055	
To Whom Paid Brothers Printing			0 3 0 7 0 8	Amount \$440.69
Address 2000 Euclid Avenue	Purpose Printing			J
City Cleveland	OH State	Zip Code 44115	Check Number 1056	
To Whom Paid Madison Graphics	<u> </u>		0 3 0 7 0 8	Amount \$2,155.00
Address 13130 Detroit Avenue	Purpose	'S		•
City Lakewood	State OH	Zip Code 44107	Check Number 1057	
To Whom Paid  Qwestcom Graphics, Inc.			M D Y 0 3 3 1 0 8	Amount \$662.66
Address 4560 State Road, Ste. C	Purpose Yard sign	าร		•
<sup>City</sup> Cleveland	State OH	Zip Code 44109	Check Number 1058	
To Whom Paid Anthony J. Russo - Transfer from S	tatement of Loans	Received Form 31-C	M D Y 0 3 3 1 0 8	Amount \$5,000.00
Address 883 Beechers Brook	Purpose Payment	on loan		
<sup>City</sup> <b>Mayfield</b>	State OH	Zip Code 44143	Check Number 1059	
				<u> </u>