

MAY 18 1992

CERTIFIED MAIL



Commissioner **ROBERT A. GARDNER**
Candidate for Congress
19th Congressional District

May 18, 1992

Clerk of the House of Representatives
1036 Longworth Office Building
Washington, D.C. 20515

147940

RECEIVED
OFFICE OF RECORDS & INFORMATION
U.S. HOUSE OF REPRESENTATIVES
1992 MAY 22 AM 10:17

RE: Robert Gardner for Congress Committee
C-00266437 Ohio 19th

Enclosed please find the May 13th Pre-Primary Report regarding
the above captioned candidate.

Sincerely,

Clarence A. Bortz
Treasurer

cc: Robert Gardner
Ohio Secretary of State

92014523027

MAY 18 1992

CERTIFIED MAIL

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
OFFICE OF RECORDS & REGISTRATION

1992 MAY 22 AM 10:17

CLERK OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) COMMITTEE TO ELECT GARDNER TO CONGRESS		2. FEC IDENTIFICATION NUMBER G-00266437
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. e/o C.A. Bortz 2226 Chimney Ridge Dr.		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
CITY, STATE and ZIP CODE Madison, OH 44057	STATE/DISTRICT Ohio 19th	

4. TYPE OF REPORT

April 15 Quarterly Report

Twelfth day report preceding Primary election on 6/2/92 in the State of Ohio
(Type of Election)

July 15 Quarterly Report

October 15 Quarterly Report

Thirtieth day report following the General Election on _____ in the State of _____

January 31 Year End Report

July 31 Mid-Year Report (Non-election Year Only)

Termination Report

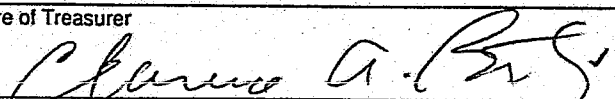
This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>4/13/92</u> through <u>5/13/92</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	7715.00	7715.00
(b) Total Contribution Refunds (from Line 20(d))	---	---
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	7715.00	7715.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5746.00	5746.00
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	5746.00	5746.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	6969.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-376-3120
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	6949.68	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Clarence A. Bortz, Treasurer

Signature of Treasurer  Date 5/18/92

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3
(revised 4/87)

92014523028

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) COMMITTEE TO ELECT GARNDER TO CONGRESS	Report Covering the Period: From: 4/13/92 To: 5/13/92	
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7715.00	
(ii) Unitemized	0.00	
(iii) Total of contributions from individuals	7715.00	7715.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	7715.00	7715.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	5000.00	5000.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b))	5000.00	5000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	12715.00	12715.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	5746.00	5746.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	5746.00	5746.00
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	12715.00
25. SUBTOTAL (add Line 23 and Line 24)	\$	12715.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	5746.00
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	6969.00

92014523029

SCHEDULE A

ITEMIZED RECEIPTS

Use separate Schedule(s) for each category of the Detailed Summary Page

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
COMMITTEE TO ELECT GARDNER TO CONGRESS

92014523030

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael P. Manary 27 Parkview Painesville, OH 44057	State Credit	5/4/92	60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner	Aggregate Year-to-Date > \$ 60.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles P. Baker, Jr. 13 Wintergreen Hill Painesville, OH 44077	Baker/Hackenberg Attorneys	5/3/92	50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 50.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Osters 827 Bayridge Blvd Willowick OH 44095	Housewife	5/6/92	25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date > \$ 25.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John A. Ray 7592 Lake Shore Blvd Madison, OH 44057	Cleveland School District	5/8/92	25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date > \$ 25.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ralph Victor 9590 Johnnycake Ridge Mentor, OH 44060	Victor Construction	5/5/92	60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Builder	Aggregate Year-to-Date > \$ 60.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hubert A. Horton 6047 Shore Dr N. Madison, OH 44057	H. Horton & Assoc.	5/5/92	50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$ 50.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul K. Cook 1851 Hubbard Rd. Madison, OH 44057	Self employed	5/5/92	100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Self - Business	Aggregate Year-to-Date > \$ 100.00	

SUBTOTAL of Receipts This Page (optional) 370.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 8
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMMITTEE TO ELECT GARDNER TO CONGRESS

92014523031

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ed Quattro 7579 Little Mountain Mentor, OH 44060		5/7/92	30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	30.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gail Ruckel 6900 Eagle Mills Rd Waite Hill, OH 44094	Ruckel Nursury	5/6/92	650.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$	650.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James R. Setele 7370 N. Ridge Rd. Madison, OH 44057	Quality Oldsmobile	5/5/92	100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$	100.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernie K. DeManelis 2850 Wagar Rd. Rocky River, OH 44116	City of Cleveland	5/5/92	60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	60.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. E. Durk 1900 Richmond Rd. Cleveland, OH 44124	T.R.W.	5/5/92	30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Accountant	Aggregate Year-to-Date > \$	30.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Irvin B. Fine 5885 Landerbrook Dr Mayfield Hts., OH 44124	Properties Development Co.	5/5/92	60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$	60.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Aingworth 7285 Allendale Dr Mentor, OH 44060	Retired	5/5/92	15.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mental Health Board	Aggregate Year-to-Date > \$	15.00

SUBTOTAL of Receipts This Page (optional)	945.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 8
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMMITTEE TO ELECT GARDNER TO CONGRESS

92014523032

A. Full Name, Mailing Address and ZIP Code H. Ray Stewart 1747 Bathgate Madison, OH 44057		Name of Employer G.T. Consultants	Date (month, day, year) 5/4/92	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Architect	Aggregate Year-to-Date > \$ 25.00	
B. Full Name, Mailing Address and ZIP Code Jerome T. Osborne, Jr. 7255 Chillicothe Rd. Mentor, OH 44060		Name of Employer Osborne, Inc.	Date (month, day, year) 4/15/92	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Owner	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Maureen Osborne 7255 Chillicothe Rd. Mentor, OH 44060		Name of Employer Housewife	Date (month, day, year) 4/15/92	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Housewife	Aggregate Year-to-Date > \$ 1000.00	
D. Full Name, Mailing Address and ZIP Code Wm. H. Brown 6797 Waterford Lane Mentor, OH 44060		Name of Employer First Mutual	Date (month, day, year) 4/13/92	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Aggregate Year-to-Date > \$ 100.00	
E. Full Name, Mailing Address and ZIP Code Albert Ratner 10800 Brookpark Rd. Cleveland, OH 44130		Name of Employer RMS Management	Date (month, day, year) 4/16/92	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Partner	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code Sam Miller 10800 Brookpark Cleveland, OH 44130		Name of Employer RMS Management	Date (month, day, year) 4/15/92	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Partner	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code Frank Findura 4089 Columbia Rd. Medina, OH 44256		Name of Employer Retired	Date (month, day, year) 4/15/92	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Teacher	Aggregate Year-to-Date > \$ 25.00	

SUBTOTAL of Receipts This Page (optional)	3150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 4 OF 8
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
COMMITTEE TO ELECT GARDNER TO CONGRESS

92014523033

A. Full Name, Mailing Address and ZIP Code Robert A. Gardner, Sr. 26142 Raintree Blvd Olmsted Falls, OH 44138	Name of Employer Telephone Co. (Retired)	Date (month, day, year) 5/8/92	Amount of Each Receipt this Period 800.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation (Retired)	Aggregate Year-to-Date > \$ 800.00	
B. Full Name, Mailing Address and ZIP Code Kathy Clay 1791 Granger Rd. Medina, OH 44256	Name of Employer Cloverleaf Local Schools	Date (month, day, year) 5/8/92	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date > \$ 200.00	
C. Full Name, Mailing Address and ZIP Code Arthur Sidley 11414 Palmer Rd. Painesville, OH 44077	Name of Employer Sidley Construction	Date (month, day, year) 5/8/92	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$ 200.00	
D. Full Name, Mailing Address and ZIP Code Robert V. D. Booth, Jr. (Geraldine R. Booth) 11255 Palmer Rd. Painesville, OH 44077	Name of Employer Self employed	Date (month, day, year) 5/7/92	Amount of Each Receipt this Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Computer programming	Aggregate Year-to-Date > \$ 50.00	
E. Full Name, Mailing Address and ZIP Code Gerald F. Wolanin 4900 Delevan Dr. Lyndhurst, OH 44124	Name of Employer Self employed	Date (month, day, year) 5/8/92	Amount of Each Receipt this Period 30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation C. P. A.	Aggregate Year-to-Date > \$ 30.00	
F. Full Name, Mailing Address and ZIP Code Jack Cottrell 415 Riverside Dr. Painesville, OH 44077	Name of Employer Lake County	Date (month, day, year) 5/9/92	Amount of Each Receipt this Period 60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer	Aggregate Year-to-Date > \$ 60.00	
G. Full Name, Mailing Address and ZIP Code Cyril H. Gilles 6531 Melshore Dr. Mentor, OH 44060	Name of Employer (Retired)	Date (month, day, year) 5/5/92	Amount of Each Receipt this Period 30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation (Retired)	Aggregate Year-to-Date > \$ 30.00	

SUBTOTAL of Receipts This Page (optional)	1370.00
TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 5 OF 8
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMMITTEE TO ELECT GARDNER TO CONGRESS

92014523034

A. Full Name, Mailing Address and ZIP Code C. Gilman Johnston 5950 Shore Dr Madison, OH 44057	Name of Employer Occupation	Date (month, day, year) 5/9/92	Amount of Each Receipt this Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 50.00	
B. Full Name, Mailing Address and ZIP Code Evelyn Hilston 4092 Lane Rd. Painesville, OH 44077	Name of Employer (Retired) Occupation (Retired)	Date (month, day, year) 5/8/92	Amount of Each Receipt this Period 30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 30.00	
C. Full Name, Mailing Address and ZIP Code Walter J. McNamara, III 7200 Center St. - Suite 300 Mentor, OH 44060	Name of Employer Self Employed Occupation Attorney	Date (month, day, year) 5/7/92	Amount of Each Receipt this Period 60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 60.00	
D. Full Name, Mailing Address and ZIP Code John W. Wiles 6962 Pennywhittle Cr Concord, OH 44077	Name of Employer Self employed Occupation Attorney	Date (month, day, year) 5/11/92	Amount of Each Receipt this Period 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 50.00	
E. Full Name, Mailing Address and ZIP Code William Francis Lennon 8447 Johnnycake Ridge Rd Mentor, OH 44060	Name of Employer Occupation	Date (month, day, year) 5/10/92	Amount of Each Receipt this Period 60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 60.00	
F. Full Name, Mailing Address and ZIP Code Adam MacKenzie 6054 Meadow Wood Dr Madison, OH 44057	Name of Employer Retired Occupation Retired	Date (month, day, year) 5/11/92	Amount of Each Receipt this Period 60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 60.00	
G. Full Name, Mailing Address and ZIP Code Glenn E. Kershaw Charlotte B. Kershaw 7235 Lake Rd E. Madison, OH 44057	Name of Employer Self employed Occupation Self employed	Date (month, day, year) 5/10/92	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 25.00	

SUBTOTAL of Receipts This Page (optional) 335.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
COMMITTEE TO ELECT GARDNER TO CONGRESS

92014523035

A. Full Name, Mailing Address and ZIP Code Charles E. Coulson 4230 St. Rt 306 Willoughby, OH 44094	Name of Employer Self employed	Date (month, day, year) 5/11/92	Amount of Each Receipt this Period 30.00
	Occupation Attorney	Aggregate Year-to-Date > \$ 30.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Mitchell I. Henn P.O.Box 398 Madison, OH 44057	Name of Employer Self-employed	Date (month, day, year) 5/10/92	Amount of Each Receipt this Period 50.00
	Occupation Dentist	Aggregate Year-to-Date > \$ 50.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Edward V. Obelenus 319 East St. Fairport, OH 44077	Name of Employer	Date (month, day, year) 5/10/92	Amount of Each Receipt this Period 25.00
	Occupation	Aggregate Year-to-Date > \$ 25.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Anne B. Chapman 7281 Taft St. Mentor, OH 44060	Name of Employer	Date (month, day, year) 5/10/92	Amount of Each Receipt this Period 100.00
	Occupation	Aggregate Year-to-Date > \$ 100.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Clarence V. Cameron Norine R. Camerson 10699 Johnnycake Ridge Cocord, OH 44077	Name of Employer	Date (month, day, year) 5/8/92	Amount of Each Receipt this Period 25.00
	Occupation	Aggregate Year-to-Date > \$ 25.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Jean M. Manary 374 Paradise Rd. Painesville, OH 44077	Name of Employer Self employed	Date (month, day, year) 5/9/92	Amount of Each Receipt this Period 25.00
	Occupation Credit	Aggregate Year-to-Date > \$ 25.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Jean M. Manary 374 Paradise Rd. Painesville, OH 44077	Name of Employer Self employed	Date (month, day, year) 5/9/92	Amount of Each Receipt this Period 25.00
	Occupation Credit	Aggregate Year-to-Date > \$ 50.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	280.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 7 OF 8

FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
 COMMITTEE TO ELECT GARDNER TO CONGRESS

92014523036

<p>A. Full Name, Mailing Address and ZIP Code Glenn E. Forbes 174 Main St. Painesville, OH 44077</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 50.00</p>	<p>Date (month, day, year) 4/29/92</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Francis T. Burichin, Jr. 908 Mentor Ave Painesville, OH 44077</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 50.00</p>	<p>Date (month, day, year) 5/9/92</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Michael P. Manary 27 Parkview Painesville, OH 44077</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer State Credit</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date > \$ 110.00</p>	<p>Date (month, day, year) 5/4/92</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Michael W. Dolney 9556 Daisy Ct. Mentor, OH 44060</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 25.00</p>	<p>Date (month, day, year) 5/8/92</p>	<p>Amount of Each Receipt this Period 25.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Phillips J. Braff 6714 Gates Mills Blvd Gates Mills, OH 44040</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Braff Mobile Homes</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date > \$ 100.00</p>	<p>Date (month, day, year) 4/30/92</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code John J. Monroe 10244 Cherry Hill Dr. Painesville, OH 44077</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sidley Construction</p> <p>Occupation Accountant</p> <p>Aggregate Year-to-Date > \$ 50.00</p>	<p>Date (month, day, year) 4/30/92</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Thomas M. Grabarczyk 2041 Shoreland Ave Toledo, OH 43611</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self employed</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 200.00</p>	<p>Date (month, day, year) 5/4/92</p>	<p>Amount of Each Receipt this Period 200.00</p>

SUBTOTAL of Receipts This Page (optional) 525.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 8 OF 8
FOR LINE NUMBER 11A1

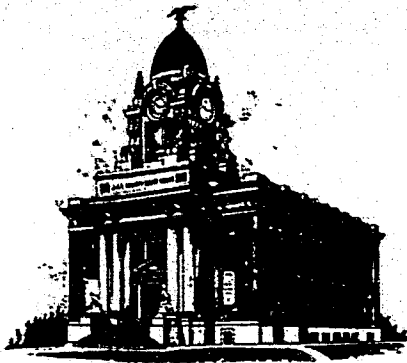
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NAME OF COMMITTEE (in Full)

COMMITTEE TO ELECT GARDNER TO CONGRESS

<p>A. Full Name, Mailing Address and ZIP Code Larry Davis 2600 South Ocean Blvd Boca Raton, FL 33432</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Best effort has been made - see attached letter</p> <p>Occupation</p>	<p>Date (month, day, year) 5/4/92</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>Aggregate Year-to-Date > \$ 300.00</p>			
<p>B. Full Name, Mailing Address and ZIP Code Thomas M. Grabarczyk 2041 Shoreland Ave Toledo, OH 43611</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self employed</p> <p>Occupation Consultant</p>	<p>Date (month, day, year) 5/4/92</p>	<p>Amount of Each Receipt this Period 340.00</p>
<p>Aggregate Year-to-Date > \$ 540.00</p>			
<p>C. Full Name, Mailing Address and ZIP Code Leo W. Scully, Sr 7786 Skyline View Dr Concord Twnship, OH 44060</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self employed</p> <p>Occupation Concord Township Trustee</p>	<p>Date (month, day, year) 5/8/92</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>Aggregate Year-to-Date > \$ 50.00</p>			
<p>D. Full Name, Mailing Address and ZIP Code Frank Nappi 2261 West Ave Ashtabula, OH 44004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Nappi's Plaza</p> <p>Occupation Owner</p>	<p>Date (month, day, year) 5/6/92</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>Aggregate Year-to-Date > \$ 50.00</p>			
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-Date > \$</p>			
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-Date > \$</p>			
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-Date > \$</p>			
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>740.00</p>
<p>TOTAL This Period (last page this line number only)</p>			<p>7715.00</p>

92014523037



Commissioner **ROBERT A. GARDNER**
Candidate for Congress
19th Congressional District

May 18, 1992

Mr. Larry Davis
2600 South Ocean Blvd
Boca Raton, FL 33432

Dear Mr. Davis:

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On behalf of the Robert Gardner for Congress Committee, I would like to thank you for your recent contribution to the Committee. Please feel certain that your contribution will be wisely used in our efforts to assure Mr. Gardner's successful election to the U.S. House of Representatives for Ohio's 19th District.

In order to comply with Federal Election laws, I must ask that you provide the following information necessary which is required to be included in the Campaign's financial disclosure statements:

Employer: _____

Occupation: _____

Kindly return this letter in the postage paid envelope provided.

Thank you once again for your contribution, and your prompt response to this request.

Sincerely,

Clarence A. Bortz
Treasurer

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

COMMITTEE TO ELECT GARDNER TO CONGRESS

92014523039

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ashtabula County Election Board 25 W. Jefferson St. Jefferson, OH 44047	Computerized list of registered voters Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/92	96.30
B. Full Name, Mailing Address and ZIP Code U.S. Post Office Route 528 Madison, OH 44057	Purpose of Disbursement Stamps Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/30/92	290.00
C. Full Name, Mailing Address and ZIP Code WERE 1041 Huron Rd. Cleveland, OH 44115	Purpose of Disbursement Radio advertising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/92	425.00
D. Full Name, Mailing Address and ZIP Code WDOK One Radio Lane Cleveland, OH 44114	Purpose of Disbursement Radio advertising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/92	2754.00
E. Full Name, Mailing Address and ZIP Code WWWE 1250 Superior Cleveland, OH 44109	Purpose of Disbursement Radio advertising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/92	2065.50
F. Full Name, Mailing Address and ZIP Code Scrip Type Publishing Inc.* 3731 Paula Dr. Richfield, OH 44286	Purpose of Disbursement Newspaper advertising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/9/92	115.20
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	\$ 5746.00

Name of Committee (in Full) COMMITTEE TO ELECT GARDNER TO CONGRESS			
A. Full Name, Mailing Address and ZIP Code of Loan Source Robert A. Gardner 2170 Chimney Ridge Madison, OH 44057	Original Amount of Loan 5000.00 (Personal funds)	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>5/11/92</u> Date Due <u>Demand</u> Interest Rate <u>0</u> %(apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code (NONE)	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			5000.00
TOTALS This Period (last page in this line only)			5000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

9 2 0 1 4 5 2 3 0 4 0

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full) COMMITTEE TO ELECT GARDNER TO CONGRESS	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Signs of Times by Campbell 279 Mentor Ave - Apt 5 Painesville, OH 44077	0.00	100.00	0.00	100.00
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Morgan Litho Inc 842 E. 79th St. - 5th Floor Cleveland, OH 44103	0.00	517.50 600.00	0.00	1117.50
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor GLM Assoc. Inc. 4312 Parklawn Dr. Willoughby, OH 44094	0.00	100.00	0.00	100.00
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Sir Speedy 25 Clairmont Dr. Painesville, OH 44077	0.00	422.48	0.00	422.48
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Gerald F. Wolanin 4900 Delevan Dr. Lyndhurst, OH 44124	0.00	209.70	0.00	209.70
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				1949.68
2) TOTAL This Period (last page this line only)				1949.68
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				5000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				6949.68

92014523041