

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Stark County Republican Party

ADDRESS (number and street) 2727 Fulton Drive NW  
Check if different than previously reported. (ACC) Canton OH 44718-3505

2. **FEC IDENTIFICATION NUMBER** ▼ C C00270934 **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y Y Y in the State of    
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 04 / 01 / 2015 through M M / D D / Y Y Y Y Y Y 04 / 30 / 2015

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 Cindy Meismer

Signature of Treasurer Cindy Meismer *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 05 / 05 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Stark County Republican Party**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="18071.72"/>	<input type="text" value="18071.72"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="59524.87"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="11730.95"/>	<input type="text" value="71120.95"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="71255.82"/>	<input type="text" value="89192.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9476.86"/>	<input type="text" value="27413.71"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="61778.96"/>	<input type="text" value="61778.96"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Stark County Republican Party**

Report Covering the Period: From:  /  /  To:  /  /

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).....	11625.00	70625.00
(ii) Unitemized .....	105.95	495.95
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11730.95	71120.95
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11730.95	71120.95
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	11730.95	71120.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11730.95	71120.95

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	1143.04	5311.94
(ii) Non-Federal Share.....	2032.05	9443.34
(b) Other Federal Operating Expenditures .....	5203.50	6432.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8378.59	21187.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	1098.27	5226.12
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	1098.27	5226.12
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	9476.86	27413.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7444.81	17970.37

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11730.95	71120.95
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11730.95	71120.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6346.54	11744.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6346.54	11744.25

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)  
**Stark County Republican Party**

Full Name (Last, First, Middle Initial) <b>A. Dale Anderson</b>		Date of Receipt
Mailing Address 6872 Glengarry Avenue		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>
City State Zip Code Canton OH 44718		<b>Transaction ID : SA11AI.24950</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1500.00"/>
Name of Employer Occupation D. Anderson Corporation Oil/Gas Production		contributor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Jordan D. Greenwald</b>		Date of Receipt
Mailing Address 1145 Seventh Street NE		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>
City State Zip Code North Canton OH 44720-2113		<b>Transaction ID : SA11AI.24952</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="125.00"/>
Name of Employer Occupation GDK & Company Insurance Salesman		contributor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="625.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Jane Murphy Timken</b>		Date of Receipt
Mailing Address 6559 Hills and Dales Road NW		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City State Zip Code Canton OH 44708		<b>Transaction ID : SA11AI.24940</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer Occupation self ATorney		contributor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="6625.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 16  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)  
**Stark County Republican Party**

**A.** Full Name (Last, First, Middle Initial)  
**Ward J. Timken Jr.**

Mailing Address 6559 Hills & Dales Rd., N.W.

City Canton	State OH	Zip Code 44708
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer The Timken Company	Occupation Executive
--	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	01	/	2015

**Transaction ID : SA11AI.24941**

Amount of Each Receipt this Period  

5000.00
---------

contribution

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period  

--

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period  

--

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11625.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Stark County Republican Party**

Full Name (Last, First, Middle Initial)

**A. Key Bank**

Mailing Address 126 Central Plaza North

City State Zip Code  
Canton OH 44702

Purpose of Disbursement  
misc credit card

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.24957**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. GoDaddy.com**

Mailing Address 14455 N.Hayden Rd  
Suite 219

City State Zip Code  
Scotsdale AZ 85260

Purpose of Disbursement  
website hosting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.24957.0**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Trail Blazer**

Mailing Address 620 Mendelssohn Ave N  
Suite 186

City State Zip Code  
Golden Valley MN 55427

Purpose of Disbursement  
computer database support

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.24957.1**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Stark County Republican Party**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address 2465 Iron Point Rd Ste 100

City Folsom State CA Zip Code 95630

Purpose of Disbursement wireless

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	21	/	2015

Transaction ID : SB21B.24957.3

Amount of Each Disbursement this Period

208.16
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Trail Blazer**

Mailing Address 620 Mendelssohn Ave N Suite 186

City Golden Valley State MN Zip Code 55427

Purpose of Disbursement data base support

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	21	/	2015

Transaction ID : SB21B.24957.4

Amount of Each Disbursement this Period

1350.00
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. User Friendly Phone Book**

Mailing Address PO Box 131929

City The Woodlands State TX Zip Code 77393

Purpose of Disbursement advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	21	/	2015

Transaction ID : SB21B.24957.5

Amount of Each Disbursement this Period

216.00
--------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Stark County Republican Party**

Full Name (Last, First, Middle Initial)

**A. Constant Contact**

Mailing Address 1601 Trapelo Rd  
Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
website

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.24957.6**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)  
**Stark County Republican Party**

Full Name (Last, First, Middle Initial)

**A. EFTPS**

Mailing Address p.o.box 173788

City State Zip Code  
Denver CO 80217-3788

Purpose of Disbursement  
payroll taxes

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB30B.24969**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Shirley R. Jones**

Mailing Address 2545 Hankins Rd., N.W.

City State Zip Code  
Massillon OH 44646

Purpose of Disbursement  
payroll

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB30B.24966**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Cindy Meisner**

Mailing Address 6657 Towpath

City State Zip Code  
Canal Fulton OH 44614

Purpose of Disbursement  
payroll

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB30B.24968**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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)  
**Stark County Republican Party**

Full Name (Last, First, Middle Initial)

**A. Treasurer State of Ohio**

Mailing Address PO Box 182215

City Columbus State OH Zip Code 44702-1736

Purpose of Disbursement  
state and school tax

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB30B.24974**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Jason Wise**

Mailing Address 1151 Rolena Cir

City Canton State OH Zip Code 44708

Purpose of Disbursement  
payroll

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB30B.24943**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Jason Wise**

Mailing Address 1151 Rolena Cir

City Canton State OH Zip Code 44708

Purpose of Disbursement  
payroll

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB30B.24967**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Stark County Republican Party

Form A: Full Name (Last, First, Middle Initial) Sand Rock Mineral Water, Transaction ID : H4.24942, Allocated Activity or Event: Administrative, Date: 04/07/2015, Amounts: FEDERAL SHARE 3.07, NONFEDERAL SHARE 5.45, TOTAL AMOUNT 8.52

Form B: Full Name (Last, First, Middle Initial) Sand Rock Mineral Water, Transaction ID : H4.24947, Allocated Activity or Event: Administrative, Date: 04/14/2015, Amounts: FEDERAL SHARE 10.80, NONFEDERAL SHARE 19.20, TOTAL AMOUNT 30.00

Form C: Full Name (Last, First, Middle Initial) Kimble Recycling & Disposal, Transaction ID : H4.24948, Allocated Activity or Event: Administrative, Date: 04/14/2015, Amounts: FEDERAL SHARE 20.61, NONFEDERAL SHARE 36.64, TOTAL AMOUNT 57.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 34.48, 61.29, 95.77

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Stark County Republican Party

Form A: Liberty Mutual Insurance. Transaction ID: H4.24949. Allocated Activity or Event: Administrative. Date: 04/14/2015. Total Amount: 764.00.

Form B: CNA Surety. Transaction ID: H4.24953. Allocated Activity or Event: Administrative. Date: 04/21/2015. Total Amount: 359.00.

Form C: Time Warner Cable. Transaction ID: H4.24954. Allocated Activity or Event: Administrative. Date: 04/21/2015. Total Amount: 373.74.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 538.83, 957.91, 1496.74.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Stark County Republican Party**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.24955</b> <b>K &amp; M Coffee Service</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6501 Promway Ave., N.W.		Allocated Activity or Event Year-To-Date _____ 13217.45	
City State Zip Code North Canton OH 44720	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: office supplies			
Activity or Event Identifier: <b>Administrative</b>			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 16.11		_____ 28.64	_____ 44.75

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.24971</b> <b>Great America</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8742 Innovation Way		Allocated Activity or Event Year-To-Date _____ 13458.09	
City State Zip Code Chicago IL 60682	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: copier lease			
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 86.63		_____ 154.01	_____ 240.64

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.24970</b> <b>Fitzpatrick Apts LTD</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4942 Higbee AVenue NW Suite A		Allocated Activity or Event Year-To-Date _____ 14705.91	
City State Zip Code Canton OH 44718	001 Category/ Type	Date <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: office rent			
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 449.22		_____ 798.60	_____ 1247.82

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 551.96		_____ 981.25		_____ 1533.21

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Stark County Republican Party

Form A: Premier Bank & Trust Co. Transaction ID: H4.24973. Allocated Activity or Event: Administrative. Date: 04/30/2015. Total Amount: 49.37.

Form B: Empty form for disbursement entry.

Form C: Empty form for disbursement entry.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (17.77), NONFEDERAL SHARE (31.60), TOTAL AMOUNT (49.37).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE (1143.04), NONFEDERAL SHARE (2032.05), TOTAL AMOUNT (3175.09).