

**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)

2729 Fulton Dr NW

Check if different
than previously
reported. (ACC)

Canton

OH

44718

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00270934

3. IS THIS
REPORTNEW
(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 M / D 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 M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2025

through

M M M / D D D / Y Y Y Y Y Y
09 30 2025

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

Conde, Albert, Roy, ,

Signature of Treasurer

Conde, Albert, Roy, ,

Date

M M M / D D D / Y Y Y Y Y Y
10 08 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Stark County Republican Party

Report Covering the Period:

From:

MM / DD / YYYY
09 / 01 / 2025

To:

MM / DD / YYYY
09 / 30 / 2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2025		134069.39
(b) Cash on Hand at Beginning of Reporting Period.....	166855.60	
(c) Total Receipts (from Line 19)	26767.96	116401.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	193623.56	250470.83
7. Total Disbursements (from Line 31)	33902.93	90750.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	159720.63	159720.63
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)	0.00	



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Stark County Republican Party

Report Covering the Period:

From:

M M / D D / Y Y Y Y
09 01 2025

To:

M M / D D / Y Y Y Y
09 30 2025**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).....

9510.00

59319.28

(ii) Unitemized

11722.96

33237.76

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

21232.96

92557.04

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

5335.00

22519.40

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

26567.96

115076.44

12. Transfers From Affiliated/Other

Party Committees.....

200.00

1325.00

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))

26767.96

116401.44

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

26767.96

116401.44

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	33902.93	90750.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	33902.93	90750.20
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 (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	33902.93	90750.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33902.93	90750.20

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	26567.96	115076.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26567.96	115076.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	33902.93	90750.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	33902.93	90750.20

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 32

<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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Borgner, Matthew, R, ,

Mailing Address 6611 Donelson Cir NW

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KWGDOccupation (for Individual)
Attorney

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2025**Transaction ID : A-51324**

Amount of Each Receipt this Period

400.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Creighton, Janet, Weir, ,

Mailing Address 2524 Charing Cross Road Northwest

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51356**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Donation

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dipietro, Gerald, R, ,

Mailing Address 901 24th Street Northeast

City
CantonState
OHZip Code
44714FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OwnerOccupation (for Individual)
Pizza Oven

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51376**

Amount of Each Receipt this Period

600.00

☐ Memo Item

2025 Reception

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

1050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 32
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Drlik, Jeffrey, T, ,

Mailing Address 1703 Lancaster Gate Southeast

City
CantonState
OHZip Code
44709FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Ohio Lottery

Occupation (for Individual)

District Director

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2025

Transaction ID : A-51334

Amount of Each Receipt this Period

100.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fitzpatrick, Scott, J, ,

Mailing Address 4147 Lochness Cir NW

City
CantonState
OHZip Code
44718-2250FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Fitzpatrick Enterprise

Occupation (for Individual)

Real Estate Developer

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2025

Transaction ID : A-51370

Amount of Each Receipt this Period

200.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Funk, Daniel, J, , Esq.

Mailing Address 4469 Henry's Mill Circle Northwest

City
CantonState
OHZip Code
44718FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Baker Dublikar

Occupation (for Individual)

Attorney

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2025

Transaction ID : A-51335

Amount of Each Receipt this Period

100.00

☐ Memo Item

2025 Reception

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

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 32

(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			

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gaicomini, Patricia, , ,

Mailing Address 5412 Bridgecreek Avenue Northwest

City
CantonState
OHZip Code
44718FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 04 / 2025

Transaction ID : A-51296

Amount of Each Receipt this Period

400.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Greenwald, Jordan, D, Hon.,

Mailing Address 1413 Harbor Drive Northwest

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

GDK & Company

Occupation (for Individual)

Insurance Salesman

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 23 / 2025

Transaction ID : A-51461

Amount of Each Receipt this Period

175.00

☐ Memo Item

Early Bird

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hindley, Benjamin, Travis, ,

Mailing Address 6669 Glengarry Ave NW

City
CantonState
OHZip Code
44718FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2025

Transaction ID : A-51327

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2025 Reception

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

1575.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 32

(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			

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kimble, Keith, , Mr.,

Mailing Address 3509 State Rt 39 NW

City
DoverState
OHZip Code
44622FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Kimble Recycling

Occupation (for Individual)

Owner

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2025

Transaction ID : A-51299

Amount of Each Receipt this Period

400.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kinlow, Richard, R, ,

Mailing Address 6122 Sorrento Ave NW

City
CantonState
OHZip Code
44718FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2025

Transaction ID : A-51291

Amount of Each Receipt this Period

130.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lohnes, Edward, A, ,

Mailing Address 885 Fairway Dr

City
AllianceState
OHZip Code
44601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Dentist

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2025

Transaction ID : A-51444

Amount of Each Receipt this Period

500.00

☐ Memo Item

Picnic

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

1030.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 32
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mahoney, Edward, A, , III

Mailing Address 8445 Foxglove Ave NW

City
ClintonState
OHZip Code
44216-9502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2025

Transaction ID : A-51436

Amount of Each Receipt this Period

70.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mathews, James, , Hon.,

Mailing Address 10836 Julie Ave NE

City
AllianceState
OHZip Code
44601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Attorney

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : A-51354

Amount of Each Receipt this Period

250.00

☐ Memo Item

Donation

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McMasters, Debra, L, Mrs.,

Mailing Address 132 22nd St NW

City
CantonState
OHZip Code
44709FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Laura of Pembroke

Occupation (for Individual)

Sales person

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : A-51350

Amount of Each Receipt this Period

100.00

☐ Memo Item

Donation

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

420.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 32

<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			

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Linda, , ,

Mailing Address 6210 Groton Street Northwest

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2025**Transaction ID : A-51316**

Amount of Each Receipt this Period

270.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miller, Patricia, A., ,

Mailing Address 1018 Brush Rd., N.e.

City
MinervaState
OHZip Code
44657FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2025**Transaction ID : A-51462**

Amount of Each Receipt this Period

1200.00

☐ Memo Item

Donation

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schumacher, Beth, Ann, ,

Mailing Address 1540 Lancaster Gate SE

City
North CantonState
OHZip Code
44709FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Housewife

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2025**Transaction ID : A-51439**

Amount of Each Receipt this Period

200.00

☐ Memo Item

2025 Reception

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

1670.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 32
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schuring, Darlene, K, ,

Mailing Address 1817 Devonshire Rd NW

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Canton RepositoryOccupation (for Individual)
Marketing Manager

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51351**

Amount of Each Receipt this Period

100.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schuring, Darlene, K, ,

Mailing Address 1817 Devonshire Rd NW

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Canton RepositoryOccupation (for Individual)
Marketing Manager

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51352**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Picnic

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schuring, Darlene, K, ,

Mailing Address 1817 Devonshire Rd NW

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Canton RepositoryOccupation (for Individual)
Marketing Manager

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 29 / 2025**Transaction ID : A-51478**

Amount of Each Receipt this Period

125.00

☐ Memo Item

McKinley Dinner

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

260.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 32
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sibila, Douglas, Jay, ,

Mailing Address 2928 Croydon Dr NW

City
CantonState
OHZip Code
44718FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Peoples Services, Inc.Occupation (for Individual)
President

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2025

Transaction ID : A-51453

Amount of Each Receipt this Period

100.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Spampanato, Ralph, F, ,

Mailing Address 4630 14th St NW

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stark CountyOccupation (for Individual)
Clerical Staff

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2025

Transaction ID : A-51393

Amount of Each Receipt this Period

135.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Street, Robert, Allen, , Jr

Mailing Address 3344 Trillium Avenue Northwest

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FltzpatrickOccupation (for Individual)
Office Manager

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : A-51366

Amount of Each Receipt this Period

300.00

☐ Memo Item

2025 Reception

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

535.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 32

<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			

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Timken, Jane, M, ,

Mailing Address 6559 Hills And Dales Road NW

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Attorney

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2025**Transaction ID : A-51293**

Amount of Each Receipt this Period

100.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Timken, Joy, A, ,

Mailing Address 6553 Hills And Dales Rd NW

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2025**Transaction ID : A-51300**

Amount of Each Receipt this Period

200.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Timken, Ward, J, , Sr.

Mailing Address 6553 Hills And Dales Rd NW

City
CantonState
OHZip Code
44708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Timken FoundationOccupation (for Individual)
President

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 23 / 2025**Transaction ID : A-51463**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Donation

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

800.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 32
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Van Ness, Michael, , ,

Mailing Address 5571 Frazer Ave NW

City
CantonState
OHZip Code
44720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

GSI, Inc

Occupation (for Individual)

Physician

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2025**Transaction ID : A-51480**

Amount of Each Receipt this Period

300.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Verble, Susan, M, ,

Mailing Address 1515 Alexandria Parkway Southeast

City
CantonState
OHZip Code
44709FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Stark County Board of Elections

Occupation (for Individual)

Director

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2025**Transaction ID : A-51435**

Amount of Each Receipt this Period

300.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Warstler, Simon, , ,

Mailing Address 802 27th Street Northeast

City
MassillonState
OHZip Code
44646FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Welder

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51375**

Amount of Each Receipt this Period

400.00

☐ Memo Item

2025 Reception

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

1000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 32

(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			

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. West, Charles, H, ,

Mailing Address 1881 Applegrove St NE

City
CantonState
OHZip Code
44721FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51367**

Amount of Each Receipt this Period

300.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, William, G, ,

Mailing Address 1568 Wellingshire Street Northeast

City
CantonState
OHZip Code
44721FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51358**

Amount of Each Receipt this Period

200.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wohlwend, Eric, M, ,

Mailing Address 5844 Dueber Ave SW

City
East SpartaState
OHZip Code
44626FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51329**

Amount of Each Receipt this Period

270.00

☐ Memo Item

2025 Reception

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

770.00

9510.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 32

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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			

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Committee To Elect Sarita Cunningham

Mailing Address 1167 Lennox Ave NE

City
MassillonState
OHZip Code
44646FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2025**Transaction ID : A-51385**

Amount of Each Receipt this Period

35.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Friends Of Faber

Mailing Address 7706 State Route 703

City
CelinaState
OHZip Code
45822FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51353**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Picnic

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Richard Regula for Stark County Commissioner

Mailing Address 820 Erie Ave SW

City
NavarreState
OHZip Code
44662FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 15 / 2025**Transaction ID : A-51363**

Amount of Each Receipt this Period

100.00

☐ Memo Item

2025 Reception

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

185.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 32

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Richard Regula for Stark County Commissioner

Mailing Address 820 Erie Ave SW

City
NavarreState
OHZip Code
44662FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2025**Transaction ID : A-51440**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sprague for Ohio

Mailing Address 4679 Winterset Drive

City
ColumbusState
OHZip Code
43220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2025**Transaction ID : A-51322**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Picnic

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Western Stark County Republicans

Mailing Address 870 Princehorn Circle Northwest

City
MassillonState
OHZip Code
44647FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2025**Transaction ID : A-51460**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Donation

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

5150.00

5335.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 32

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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ostrowski for Judge

Mailing Address 354 Bonnett Street Southwest

City
North CantonState
OHZip Code
44720FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2025

Transaction ID : A-51290

Amount of Each Receipt this Period

200.00

☐ Memo Item

2025 Reception

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

200.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Ahola HR Solutions

Mailing Address 6820 W Snowville Rd.

City
Brecksville,State
OHZip Code
44141

Purpose of Disbursement

Payroll Fee

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51433

Amount of Each Disbursement this Period

144.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Alliance Area Republican Club

Mailing Address 1415 Westwood Ave

City
AllianceState
OHZip Code
44601

Purpose of Disbursement

Donation

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51468

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Electric Power

Mailing Address PO Box 24401

City
CantonState
OHZip Code
44701-4401

Purpose of Disbursement

Utilities

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51430

Amount of Each Disbursement this Period

286.77

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1931.59

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. American Electric Power

Mailing Address PO Box 24401

City
CantonState
OHZip Code
44701-4401

Purpose of Disbursement

Utilities

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51475

Amount of Each Disbursement this Period

242.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Capital One

Mailing Address P. O. Box 4069

City
Carol StreamState
ILZip Code
60197-4069

Purpose of Disbursement

Credit Card Charges

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51318

Amount of Each Disbursement this Period

2686.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Capron, Robert, Joseph, , III

Mailing Address 11579 Forest Meadows Cir NW

City
UniontownState
OHZip Code
44685

Purpose of Disbursement

Payroll

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51274

Amount of Each Disbursement this Period

945.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3874.48

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Capron, Robert, Joseph, , III

Mailing Address 11579 Forest Meadows Cir NW

City
UniontownState
OHZip Code
44685

Purpose of Disbursement

Payroll

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51431

Amount of Each Disbursement this Period

982.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Charter Communications

Mailing Address PO Box 6030

City
Carol StreamState
ILZip Code
60197-6030

Purpose of Disbursement

Internet/Phone

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51459

Amount of Each Disbursement this Period

195.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Conde, Albert, Roy, ,

Mailing Address 4647 Renworth Ave NE

City
CantonState
OHZip Code
44714

Purpose of Disbursement

Payroll-Conde

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51432

Amount of Each Disbursement this Period

481.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1658.75

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Conde, Albert, Roy, ,

Mailing Address 4647 Renworth Ave NE

City
CantonState
OHZip Code
44714

Purpose of Disbursement

2025 Reception

Candidate Name

007

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51448

Amount of Each Disbursement this Period

10288.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Conde, Albert, Roy, ,

Mailing Address 4647 Renworth Ave NE

City
CantonState
OHZip Code
44714

Purpose of Disbursement

Postage

Candidate Name

007

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51473

Amount of Each Disbursement this Period

11.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dex Imaging

Mailing Address P. O. Box 17299

City
ClearwaterState
FLZip Code
33762-0299

Purpose of Disbursement

Copier monthly contract

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51477

Amount of Each Disbursement this Period

40.98

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10340.38

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. DoubleTree by Hilton

Mailing Address 320 Market Avenue South

City
CantonState
OHZip Code
44702

Purpose of Disbursement

Event Deposit

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51484

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Enbridge Gas Ohio

Mailing Address PO Box 26785

City
RichmondState
VAZip Code
23261-6785

Purpose of Disbursement

Natural gas

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51317

Amount of Each Disbursement this Period

67.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fitzpatrick Apts LtdMailing Address 4334 Munson Street Northwest
Suite 202City
CantonState
OHZip Code
44718

Purpose of Disbursement

Rent

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51476

Amount of Each Disbursement this Period

1395.13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2462.87

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Integrated Solutions: PoliticalMailing Address 4142 Adams Avenue
Suite 103-550City
San DiegoState
CAZip Code
92116

Purpose of Disbursement

Financial Software

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51275

Amount of Each Disbursement this Period

218.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LEAF Leasing

Mailing Address PO Box 5066

City
HartfordState
CTZip Code
06102-5066

Purpose of Disbursement

Copier Lease

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51273

Amount of Each Disbursement this Period

247.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LEAF Leasing

Mailing Address PO Box 5066

City
HartfordState
CTZip Code
06102-5066

Purpose of Disbursement

Copier Insurance

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51449

Amount of Each Disbursement this Period

14.87

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

481.53

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. North Canton Republican Committee

Mailing Address 1296 New England Dr SE

City
North CantonState
OHZip Code
44720

Purpose of Disbursement

Donation

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51470

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Schumacher, Beth, Ann, ,

Mailing Address 1540 Lancaster Gate SE

City
North CantonState
OHZip Code
44709

Purpose of Disbursement

Picnic

Candidate Name

003

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51454

Amount of Each Disbursement this Period

464.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Schumacher, Beth, Ann, ,

Mailing Address 1540 Lancaster Gate SE

City
North CantonState
OHZip Code
44709

Purpose of Disbursement

2025 Reception

Candidate Name

003

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51455

Amount of Each Disbursement this Period

158.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1622.04

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Sliman's Printery Inc.

Mailing Address 624 Fifth Street NW

City
CantonState
OHZip Code
44703

Purpose of Disbursement

Office Printing

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51450

Amount of Each Disbursement this Period

736.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sliman's Printery Inc.

Mailing Address 624 Fifth Street NW

City
CantonState
OHZip Code
44703

Purpose of Disbursement

Slate Cards

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51482

Amount of Each Disbursement this Period

530.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sliman's Printery Inc.

Mailing Address 624 Fifth Street NW

City
CantonState
OHZip Code
44703

Purpose of Disbursement

Slate Cards

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51483

Amount of Each Disbursement this Period

65.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1331.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Square Services LLC

Mailing Address 300 Broadway

City
MethuenState
MAZip Code
01844

Purpose of Disbursement

Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51485

Amount of Each Disbursement this Period

15.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stark County Young Republicans

Mailing Address 3625 Darlington Ave NW

City
CantonState
OHZip Code
44708

Purpose of Disbursement

Donation

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51467

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Timken, William, R, Ambassador, Jr

Mailing Address 2321 Brentwood Road NW

City
CantonState
OHZip Code
44708

Purpose of Disbursement

Transfer to correct account-JUDICIAL

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51519

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6515.18

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Votes for Women

Mailing Address 115 Dewalt Ave NW

City
CantonState
OHZip Code
44702

Purpose of Disbursement

Donation

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51469

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wesbanco Bank (Federal Acct)

Mailing Address 6141 Whipple Ave NW

City
North CantonState
OHZip Code
44720

Purpose of Disbursement

Service charge

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51474

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Western Stark County Republicans

Mailing Address 870 Princehorn Circle Northwest

City
MassillonState
OHZip Code
44647

Purpose of Disbursement

Donation

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51465

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3035.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Wix.com LTD

Mailing Address 40 Ha-Namal Street

City
Haifa

State

Zip Code
6350671

Purpose of Disbursement

Website processing fee

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51276

Amount of Each Disbursement this Period

12.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wix.com LTD

Mailing Address 40 Ha-Namal Street

City
Haifa

State

Zip Code
6350671

Purpose of Disbursement

Website processing fee

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51287

Amount of Each Disbursement this Period

3.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Wix.com LTD

Mailing Address 40 Ha-Namal Street

City
Haifa

State

Zip Code
6350671

Purpose of Disbursement

Website processing fee

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	6			2	0	2	5	

FEC Identification Number

C

Transaction ID : B-51429

Amount of Each Disbursement this Period

22.03

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

37.87

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

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NAME OF COMMITTEE (In Full)

Stark County Republican Party

Full Name (Last, First, Middle Initial)

A. Wix.com LTD

Mailing Address 40 Ha-Namal Street

City
Haifa

State

Zip Code
6350671

Purpose of Disbursement

Website processing fee

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2024

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : B-51491

Amount of Each Disbursement this Period

88.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

88.31

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

33472.93