

Ohio Campaign Finance Report

Prescribed by Secretary of State 3.05

Full Name of Committee Josh Hostetter for Coventry School Board						Registration Number, if PAC				
Full Name of Candidate Joshua L. Hostetter										
Street Address 3344 S. Main St				Office Sought School Board		District Coventry				
City Akron				State OH		Zip Code 44319				
Type of Report (place X to the left of report type)	<input type="checkbox"/>	Pre-Primary	<input type="checkbox"/>	Post-Primary	<input checked="" type="checkbox"/>	Pre-General	<input type="checkbox"/>	Post-General	<input type="checkbox"/>	Annual Year
	<input type="checkbox"/>	July Monthly	<input type="checkbox"/>	August Monthly	<input type="checkbox"/>	September Monthly	<input type="checkbox"/>	Termination	<input type="checkbox"/>	Semiannual
Amended Report?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Report Electronically Filed?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Date of Election	M	D	Y	
							1	0	7	1 7

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(11) for details.

1. Amount brought forward from last report	\$	0	00
2. Total monetary contributions (From Form No. 31-A)	\$	345	00
3. Total other income (From Form No. 31-A-2)	\$		
4. Total funds available (sum of lines 1, 2, 3)	\$	345	00
5. Total monetary expenditures (From Form No. 31-B)	\$		
6. Balance on hand (line 4 minus line 5)	\$	345	00
7. Value of in-kind contributions received (From Form No. 31-I-1)	\$	866	16
8. Value of in-kind contributions received from Form No. 31-I-2	\$		
9. Outstanding loans owed by committee (From Form No. 31-C)	\$		
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	446	67
11. Outstanding loans owed to committee (From Form No. 31-K)	\$		
12. Value of independent expenditures made (From Form No. 31-U)	\$		
13. For Electronic Filing Entities only Sum of lines 2, 7, and amount of any new loans received this period.	\$		

**OFFICIAL COPY
SUMMIT COUNTY
BOARD OF ELECTIONS**

2017 OCT 26 PM 12:28

AKRON, OH 44302

#1548 Ave

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

Joshua L. Hostetter, Treasurer
Print Name and Title (Treasurer and Deputy Treasurer only)

Joshua L. Hostetter
Signature

10/26/17
Date

Contribution pages **2**

Expenditure pages **0**

Other pages **1**

Total pages **3**

Statement of Contributions Received

Prescribed by Secretary of State 03 05

Name of Committee in Full Josh Hostetter for Coventry School Board						
Full Name of Contributor Susan Darby				Registration Number, if PAC		
Street Address 7 Whitefriars Dr.		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Check	
City Akron	State OH	Zip Code 44319	M 09	D 03	Y 17	Amount 350.00
Full Name of Contributor Lorene Reed				Registration Number, if PAC		
Street Address 64 Whitefriars Dr.		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Check	
City Akron	State OH	Zip Code 44319	M 09	D 03	Y 17	Amount 95.00
Full Name of Contributor 2000 Ryba Lawrence Ryba				Registration Number, if PAC		
Street Address 65 Whitefriars Dr.		Employer Occupation Labor Organization*			Form (Cash, Check, etc.) Check	
City Akron	State OH	Zip Code 44319	M 10	D 01	Y 17	Amount 200.00
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer Occupation Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer Occupation Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer Occupation Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer Occupation Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer Occupation Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Josh Hostetler for Coventry School Board			
Full Name of Contributor Coventry Schools Taxpayers Accountability Coalition		Employer, Occupation, Labor Organization*	
Street Address 65 Whitefriars Dr.		Description of Item or Service 1/2 Billboard	
City Akron		State OH	Zip Code 44319
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Coventry Schools Taxpayers Accountability Coalition		Employer, Occupation, Labor Organization*	
Street Address 65 Whitefriars Dr.		Description of Item or Service 25% Suburbanite Ad	
City Akron		State OH	Zip Code 44319
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Coventry Schools Taxpayers Accountability Coalition		Employer, Occupation, Labor Organization*	
Street Address 65 Whitefriars Dr.		Description of Item or Service 10% SENL Paper Ad	
City Akron		State OH	Zip Code 44319
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Joni Murgatroyd		Employer, Occupation, Labor Organization*	
Street Address 1335 Steve Drive		Description of Item or Service Yard Signs	
City Akron		State OH	Zip Code 44319
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Statement of Outstanding Debts

Prescribed by Secretary of State 201

Full Name of Committee Josh Hostetler for Coventry School Board							
To Whom Owed Joshua L. Hostetler				Prior Amount		Amt Incurred this Period 125.00	
Address 3344 S. Main St.				Item or Purpose of Debt Workshop/Petitions		Outstanding Balance 125.00	
City Akron		State OH	Zip Code 44319		Payments This Period		
Date Debt was originally Incurred 08 29 17				Date		Amount	
				M	D	Y	\$
Registration Number, if PAC				M	D	Y	
				M	D	Y	
To Whom Owed Joshua L. Hostetler				Prior Amount		Amt Incurred this Period 271.67	
Address 3344 S. Main St.				Item or Purpose of Debt Yard Signs		Outstanding Balance 271.67	
City Akron		State OH	Zip Code 44319		Payments This Period		
Date Debt was originally Incurred 09 30 17				Date		Amount	
				M	D	Y	\$
Registration Number, if PAC				M	D	Y	
				M	D	Y	
To Whom Owed Joshua L. Hostetler				Prior Amount		Amt Incurred this Period 50.00	
Address 3344 S. Main St.				Item or Purpose of Debt Facebook Ad		Outstanding Balance 50.00	
City Akron		State OH	Zip Code 44319		Payments This Period		
Date Debt was originally Incurred 10 16 17				Date		Amount	
				M	D	Y	\$
Registration Number, if PAC				M	D	Y	
				M	D	Y	

If a debt is forgiven, write "Forgiven" in the "Outstanding Balance" column. Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Total amount forgiven should be included in the In-Kind Contributions Received (Form No. 31-J-1). Transfer total outstanding debt amount to the cover page.

Total Payments this Period \$ (also record on Form 31-B)

Total Outstanding Balance \$ 446.67 (also record on cover page)