

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee The Woodridge Levy Committee						Registration Number, if PAC					
Full Name of Candidate											
Street Address 2381 W. Streetsboro Rd					Office Sought			District			
City Peninsula					State OH		Zip Code 44264				
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		1 ^M	1	0 ^D	7	1 ^Y	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(H) for details.

1. Amount brought forward from last report	\$	5663	28
2. Total monetary contributions (From Form No. 31-A)	\$	1029	50
3. Total other income (From Form No. 31-A-2)	\$	0	00
4. Total funds available (sum of lines 1, 2, 3)	\$	6692	78
5. Total monetary expenditures (From Form No. 31-B)	\$	2154	92
6. Balance on hand (line 4 minus line 5)	\$	4537	86
7. Value of in-kind contributions received (From Form No. 31-I)	\$		
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$		
9. Outstanding loans owed by committee (From Form No. 31-C)	\$		
10. Outstanding debts owed by committee (From Form No. 31-N)	\$		
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.	\$		

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SUMMIT COUNTY
BOARD OF ELECTIONS**

2017 OCT 23 PM 12:22

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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.

Marilyn Hansen, Treas
Print Name and Title (Treasurer and Deputy Treasurer only)

Marilyn Hansen
Signature

10-23-2017
Date

Contribution pages 4

Expenditure pages 1

Other pages 1

Total pages 6

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>The Woodruff-Lery Committee</i>							
Full Name of Contributor <i>Maureen Liban</i>						Registration Number, if PAC	
Street Address <i>9315 Quiescive</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Streetsboro</i>		State <i>OH</i>	Zip Code <i>44241</i>		M <i>09</i>	D <i>15</i>	Y <i>17</i>
Amount		<i>10.00</i>					
Full Name of Contributor <i>Angela Marie Hreck</i>							
Street Address <i>2562 Buckeye Blvd.</i>						Registration Number, if PAC	
City <i>Lavenna</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Lavenna</i>		State <i>OH</i>	Zip Code <i>44266</i>		M <i>09</i>	D <i>15</i>	Y <i>17</i>
Amount		<i>10.00</i>					
Full Name of Contributor <i>Sharon L. Albers</i>							
Street Address <i>5357 Rockledge Dr.</i>						Registration Number, if PAC	
City <i>Stow</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Stow</i>		State <i>OH</i>	Zip Code <i>44224</i>		M <i>09</i>	D <i>15</i>	Y <i>17</i>
Amount		<i>5.00</i>					
Full Name of Contributor <i>Thomas Noelhouse</i>							
Street Address <i>304 Hathaway Dr.</i>						Registration Number, if PAC	
City <i>Cuyahoga Falls</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Cuyahoga Falls</i>		State <i>OH</i>	Zip Code <i>44223</i>		M <i>09</i>	D <i>20</i>	Y <i>17</i>
Amount		<i>72.00</i>					
Full Name of Contributor <i>Ashley N. McLaughlin</i>							
Street Address <i>112 S. Balch St Apt 2</i>						Registration Number, if PAC	
City <i>Akron</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Akron</i>		State <i>OH</i>	Zip Code <i>44302-1503</i>		M <i>09</i>	D <i>15</i>	Y <i>17</i>
Amount		<i>5.00</i>					
Full Name of Contributor <i>Thatt Melissa</i>							
Street Address <i>5416 State Route 303</i>						Registration Number, if PAC	
City <i>Lavenna</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Lavenna</i>		State <i>OH</i>	Zip Code <i>44266-9487</i>		M <i>09</i>	D <i>15</i>	Y <i>17</i>
Amount		<i>5.00</i>					
Full Name of Contributor <i>Nicole L. Thompson</i>							
Street Address <i>3305 Shade Road</i>						Registration Number, if PAC	
City <i>Akron</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Akron</i>		State <i>OH</i>	Zip Code <i>44333</i>		M <i>09</i>	D <i>15</i>	Y <i>17</i>
Amount		<i>5.00</i>					
Full Name of Contributor <i>Elizabeth Serin</i>							
Street Address <i>656 North Hedder Valley Road</i>						Registration Number, if PAC	
City <i>Cuyahoga Falls</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Cuyahoga Falls</i>		State <i>OH</i>	Zip Code <i>44223-3019</i>		M <i>09</i>	D <i>20</i>	Y <i>17</i>
Amount		<i>115.00</i>					

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

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>The Woodlodge Levy Committee</i>						
Full Name of Contributor <i>Elizabeth Serri</i>				Registration Number, if PAC		
Street Address <i>656 North Hidden Valley Rd</i>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Cuyahoga Falls, OH</i>	State <i>OH</i>	Zip Code <i>44223-3019</i>	M <i>09</i>	D <i>25</i>	Y <i>17</i>	Amount <i>100.00</i>
Full Name of Contributor <i>Sharon Allenspad</i>				Registration Number, if PAC		
Street Address <i>5357 Rochelle Dr.</i>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>How</i>	State <i>OH</i>	Zip Code <i>44224</i>	M <i>09</i>	D <i>22</i>	Y <i>17</i>	Amount <i>10.00</i>
Full Name of Contributor <i>Ashley M. NeLaughter</i>				Registration Number, if PAC		
Street Address <i>112 S. Balch St, Apt 2</i>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44302-1603</i>	M <i>09</i>	D <i>22</i>	Y <i>17</i>	Amount <i>5.00</i>
Full Name of Contributor <i>Therilyn Thacker</i>				Registration Number, if PAC		
Street Address <i>2381 N. Streetboro Rd</i>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Lerissula</i>	State <i>OH</i>	Zip Code <i>44264</i>	M <i>09</i>	D <i>05</i>	Y <i>17</i>	Amount <i>88.50</i>
Full Name of Contributor <i>Elizabeth Serri</i>				Registration Number, if PAC		
Street Address <i>656 North Hidden Valley Rd</i>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Cuyahoga Falls, OH</i>	State <i>OH</i>	Zip Code <i>44223-3019</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>65.00</i>
Full Name of Contributor <i>Natalie Sproun</i>				Registration Number, if PAC		
Street Address <i>9645 Brecksville Rd.</i>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Brecksville</i>	State <i>OH</i>	Zip Code <i>44141</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>10.00</i>
Full Name of Contributor <i>Nancy Snyder</i>				Registration Number, if PAC		
Street Address <i>2095 Cartersburg Rd.</i>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44333</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>10.00</i>
Full Name of Contributor <i>Kevin Hearty</i>				Registration Number, if PAC		
Street Address <i>2188 Lincrook Trail</i>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>
City <i>Cuyahoga Falls</i>	State <i>OH</i>	Zip Code <i>44223</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>25.00</i>

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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>The Woodridge Levy Committee</i>						
Full Name of Contributor <i>Rosemarie Marsh</i>				Registration Number, if PAC		
Street Address <i>1785 Stony Hill Dr.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Hudson</i>	State <i>OH</i>	Zip Code <i>44236</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>10.00</i>
Full Name of Contributor <i>Geoffrey McLaughlin</i>				Registration Number, if PAC		
Street Address <i>112 S. Balch St Apt B</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44302</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>5.00</i>
Full Name of Contributor <i>Angela Hornek</i>				Registration Number, if PAC		
Street Address <i>2562 Buckeye Blvd</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Lavessa</i>	State <i>OH</i>	Zip Code <i>44266</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>5.00</i>
Full Name of Contributor <i>Lauren Witsamer</i>				Registration Number, if PAC		
Street Address <i>2620 Sylvan Road</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Cuyahoga Falls</i>	State <i>OH</i>	Zip Code <i>44221</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>5.00</i>
Full Name of Contributor <i>Nicole Thompson</i>				Registration Number, if PAC		
Street Address <i>3305 Shade Rd.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Akron</i>	State <i>OH</i>	Zip Code <i>44333</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>5.00</i>
Full Name of Contributor <i>Elizabeth Serri</i>				Registration Number, if PAC		
Street Address <i>656 North Hidden Valley</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Cuyahoga Falls</i>	State <i>OH</i>	Zip Code <i>44223</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>120.00</i>
Full Name of Contributor <i>Squires, Patton & Briggs Political Action Committee</i>				Registration Number, if PAC		
Street Address <i>2550 N. Street N.W.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Washington</i>	State <i>D.C.</i>	Zip Code <i>20037</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>250.00</i>
Full Name of Contributor <i>Susan Krongold</i>				Registration Number, if PAC		
Street Address <i>1831 - 17th Street</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>	
City <i>Cuyahoga Falls</i>	State <i>OH</i>	Zip Code <i>44223</i>	M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>5.00</i>

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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>The Woodruffe Levy Committee</i>									
Full Name of Contributor <i>Elizabeth Serri</i>						Registration Number, if PAC			
Street Address <i>656 North Hadden Valley</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>Checks</i>		
City <i>Cuyahoga Falls</i>		State <i>OH</i>	Zip Code <i>44223</i>		M <i>10</i>	D <i>09</i>	Y <i>17</i>	Amount <i>\$4.00</i>	
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	
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	

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Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full										
<i>The Woodrider Levy Committee</i>										
To Whom Paid							M	D	Y	Amount
<i>Post Signs Akron</i>							09	22	17	715.00
Address			Purpose							
<i>1783 Brittain Road</i>			<i>large yard signs for levy</i>							
City			State	Zip Code		Check Number				
<i>Akron</i>			OH	<i>44310-2717</i>		<i>1100</i>				
To Whom Paid							M	D	Y	Amount
<i>None</i>										0.00
Address			Purpose							
<i>None</i>			<i>None</i>							
City			State	Zip Code		Check Number				
<i>None</i>			OH			<i>1101</i>				
To Whom Paid							M	D	Y	Amount
<i>Postmaster</i>							10	12	17	1115.92
Address			Purpose							
			<i>Postage to mail large postcard</i>							
City			State	Zip Code		Check Number				
<i>Akron</i>			OH	<i>44300</i>		<i>1102</i>				
To Whom Paid							M	D	Y	Amount
<i>Young's Screen Printing</i>							10	16	17	324.00
Address			Purpose							
<i>1245 Munroe Falls Dr.</i>			<i>T-shirts with printing on them</i>							
City			State	Zip Code		Check Number				
<i>Cuyahoga Falls</i>			OH	<i>44221</i>		<i>1103</i>				
To Whom Paid							M	D	Y	Amount
Address			Purpose							
City			State	Zip Code		Check Number				
			OH							
To Whom Paid							M	D	Y	Amount
Address			Purpose							
City			State	Zip Code		Check Number				
			OH							
To Whom Paid							M	D	Y	Amount
Address			Purpose							
City			State	Zip Code		Check Number				
			OH							