



Committee Name <b>THE WOODRIDGE LEVY COMMITTEE</b>		Office Sought		District
Street Address <b>2381 W. STREETSBORO ROAD</b>		City <b>PENINSULA</b>	State <b>OH</b>	Zip <b>44264</b>
Candidate Name OR PAC Registration Number		Treasurer Name <b>MARILYN HANSEN</b>		Election Date (MM/DD/YYYY) <b>11-06-18</b>

**Type of Report (choose one):**

Annual
  Semiannual
  Pre-Primary
  Post-Primary
  Pre-General
  Post-General

**Statewide Candidates Only:**

July Monthly
  August Monthly
  September Monthly

Year **2018**

<b>Amended Report</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Termination</b> <input type="checkbox"/> Check this box if the committee wishes to terminate with this report	<b>Short Form Report (R.C. 3517.10(H))</b> <input type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions.
----------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------

1. Amount brought forward from last report	6318.72
2. Total monetary contributions (From Forms 31-A and 31-E)	996.10
3. Total other income (From Form 31-A-2)	919.62
4. Total funds available (sum of lines 1, 2, 3)	8234.44
5. Total monetary expenditures (From Forms 31-B and 31-F)	6751.96
6. Balance on hand (line 4 minus line 5)	1482.48
7. Value of in-kind contributions received (From Form 31-J-1)	<b>49.77</b>
8. Value of in-kind contributions made (From Form 31-J-2)	
9. Outstanding loans owed by committee (From Form 31-C)	
10. Outstanding debts owed by committee (From Form 31-N)	
11. Outstanding loans owed to committee (From Form 31-K)	
12. Value of independent expenditures made (From Form 31-U)	

2018 DEC 10 AM 9:59

SUMMIT COUNTY  
 BOARD OF ELECTIONS  
 AKRON OHIO 44331  
**#2654 Ave**

OFFICIAL COPY  
 SUMMIT COUNTY  
 BOARD OF ELECTIONS

**THIS STATEMENT IS MADE UNDER PENALTY OF ELECTION FALSIFICATION.  
 WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.**

*Marilyn Hansen*  
 Signature of Treasurer or Deputy Treasurer

**12-10-2018**  
 Date (MM/DD/YYYY)

Contribution Pages <b>1</b>	Expenditure Pages <b>2</b>	Other Pages <b>3</b>	Total Pages <b>6</b>
--------------------------------	-------------------------------	-------------------------	-------------------------



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> <i>The Woodridge Levy Committee</i>				
<b>Full Name of Contributor</b> <i>The Woodridge Foundation</i>			<b>Registration Number, if PAC</b>	
<b>Street Address</b> <i>4411 Quirk Rd.</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, <u>Check</u>, etc.)</b>
<b>City</b> <i>Lerinsula</i>	<b>State</b> OH	<b>Zip Code</b> <i>44264</i>	<b>Date (MM/DD/YYYY)</b> <i>10-18-18</i>	<b>Amount</b> <i>400.00</i>
<b>Full Name of Contributor</b> <i>Joyce A. Roth Trustee</i>			<b>Registration Number, if PAC</b>	
<b>Street Address</b> <i>150 Meadow Lane</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, <u>Check</u>, etc.)</b>
<b>City</b> <i>Lerinsula</i>	<b>State</b> OH	<b>Zip Code</b> <i>44264</i>	<b>Date (MM/DD/YYYY)</b> <i>11-14-18</i>	<b>Amount</b> <i>84.00</i>
<b>Full Name of Contributor</b> <i>Laura S. Roever</i>			<b>Registration Number, if PAC</b>	
<b>Street Address</b> <i>1292 North Howard St</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, <u>Check</u>, etc.)</b>
<b>City</b> <i>Abron</i>	<b>State</b> OH	<b>Zip Code</b> <i>44310</i>	<b>Date (MM/DD/YYYY)</b> <i>11-9-18</i>	<b>Amount</b> <i>10.00</i>
<b>Full Name of Contributor</b> <i>Lisa Coburn</i>			<b>Registration Number, if PAC</b>	
<b>Street Address</b> <i>2839 Foxwood St</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, <u>Check</u>, etc.)</b>
<b>City</b> <i>Cuyahoga Falls</i>	<b>State</b> OH	<b>Zip Code</b> <i>44221</i>	<b>Date (MM/DD/YYYY)</b> <i>11-9-18</i>	<b>Amount</b> <i>5.00</i>
<b>Full Name of Contributor</b> <i>The Woodridge Foundation</i>			<b>Registration Number, if PAC</b>	
<b>Street Address</b> <i>4411 Quirk Rd</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, <u>Check</u>, etc.)</b>
<b>City</b> <i>Lerinsula</i>	<b>State</b> OH	<b>Zip Code</b> <i>44264</i>	<b>Date (MM/DD/YYYY)</b> <i>11-30-18</i>	<b>Amount</b> <i>497.10</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 Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> <i>The Woodridge Levy Committee</i>			
<b>To Whom Paid</b> <i>Labels &amp; Letters</i>		<b>Date (MM/DD/YYYY)</b> <i>10-24-18</i>	<b>Amount</b> <i>1404.62</i>
<b>Street Address</b> <i>1533 Commerce Dr.</i>		<b>Purpose</b> <i>Post Card, Mailing expense, door tags, printing expense</i>	
<b>City</b> <i>Stow</i>	<b>State</b> <i>OH</i>	<b>Zip Code</b> <i>44264</i>	<b>Check Number</b> <i>1114</i>
<b>To Whom Paid</b> <i>U.S. Postmaster</i>		<b>Date (MM/DD/YYYY)</b> <i>10-25-18</i>	<b>Amount</b> <i>1307.88</i>
<b>Street Address</b>		<b>Purpose</b> <i>Postage for postcard mailing</i>	
<b>City</b> <i>Cleveland</i>	<b>State</b> <i>OH</i>	<b>Zip Code</b> <i>444--</i>	<b>Check Number</b> <i>1115</i>
<b>To Whom Paid</b> <i>Just Signs Akron</i>		<b>Date (MM/DD/YYYY)</b> <i>11-9-18</i>	<b>Amount</b> <i>3057.50</i>
<b>Street Address</b> <i>1783 Brittain Road</i>		<b>Purpose</b> <i>Barriers, signs, large yard signs</i>	
<b>City</b> <i>Akron</i>	<b>State</b> <i>OH</i>	<b>Zip Code</b> <i>44310</i>	<b>Check Number</b> <i>1116</i>
<b>To Whom Paid</b> <i>Scott Karlo</i>		<b>Date (MM/DD/YYYY)</b> <i>11-9-18</i>	<b>Amount</b> <i>281.96</i>
<b>Street Address</b> <i>112 Smokey</i>		<b>Purpose</b> <i>Supplies for Desferal Rally</i>	
<b>City</b> <i>Cuyahoga Falls</i>	<b>State</b> <i>OH</i>	<b>Zip Code</b> <i>44223</i>	<b>Check Number</b> <i>1117</i>
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b> <i>provided</i>		<b>Purpose</b>	
<b>City</b>	<b>State</b> <i>OH</i>	<b>Zip Code</b>	<b>Check Number</b> <i>1118</i>

Page Total \$ 6051.96



**Statement of Expenditures**

Form 31-B

R.C. 3517.10

<b>Full Name of Committee</b> <i>The Woodridge Levy Committee</i>			
<b>To Whom Paid</b> <i>The Marketing Company</i>		<b>Date (MM/DD/YYYY)</b> <i>11-22-18</i>	<b>Amount</b> <i>\$400.00</i>
<b>Street Address</b> <i>5972 Akron Lissaula Rd</i>		<b>Purpose</b> <i>levy ads on Facebook Ads</i>	
<b>City</b> <i>Lissaula</i>	<b>State</b> OH	<b>Zip Code</b> <i>44264</i>	<b>Check Number</b> <i>1119</i>
<b>To Whom Paid</b> <i>Tom Norehouse</i>		<b>Date (MM/DD/YYYY)</b> <i>12-9-18</i>	<b>Amount</b> <i>300.00</i>
<b>Street Address</b> <i>304 Hathaway Dr.</i>		<b>Purpose</b> <i>first class stamps for mailing</i>	
<b>City</b> <i>Cuyahoga Falls</i>	<b>State</b> OH	<b>Zip Code</b> <i>44223</i>	<b>Check Number</b> <i>1120</i>
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>	
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Check Number</b>
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>	
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Check Number</b>
<b>To Whom Paid</b>		<b>Date (MM/DD/YYYY)</b>	<b>Amount</b>
<b>Street Address</b>		<b>Purpose</b>	
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Check Number</b>

Page Total \$ *700.00*



**Statement of Other Income**

Form 31-A-2

R.C. 3517.10(B)

<b>Full Name of Committee</b> <i>The Woodridge Levy Committee</i>			
<b>Full Name of Contributor</b> <i>Labels &amp; Letters</i>		<b>Registration Number, if PAC</b>	
<b>Street Address</b> <i>1533 Commerce St</i>	<b>Type*</b> Refund <i>Refund</i>	<b>Date (MM/DD/YYYY)</b> <i>11-15-18</i>	<b>Form (Cash, Check, etc.)</b> <input checked="" type="checkbox"/> Cash
<b>City</b> <i>Stow</i>	<b>State</b> OH	<b>Zip Code</b> <i>44224</i>	<b>Amount</b> <i>919.62</i>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Type*</b> Refund	<b>Date (MM/DD/YYYY)</b>	<b>Form (Cash, Check, etc.)</b>
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Amount</b>

\* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.



**In-Kind Contributions Received**

Form 31-J-1  
R.C. 3517.10

<b>Full Name of Committee</b> <i>The Woodridge Levy Committee</i>				
<b>Full Name of Contributor</b> <i>The Marketing Company</i>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b> <i>5972 Oberlin Perimeter Rd</i>		<b>Description of Item or Service</b> <i>Rocket Payment for Facebook Ads</i>		<b>Date (MM/DD/YYYY)</b> <i>11-20-18</i>
<b>City</b> <i>Perinsula</i>		<b>State</b> <i>Ohio</i>	<b>Zip Code</b> <i>44264</i>	<b>Fair Market Value</b> <i>\$149.77</i>
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>Full Name of Contributor</b> <i>Suzanne Opton</i>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b> <i>1938 Main Street</i>		<b>Description of Item or Service</b> <i>Quill Individual Bottle and Key chain type holder (5000)</i>		<b>Date (MM/DD/YYYY)</b> <i>08/10/2018</i>
<b>City</b> <i>Perinsula</i>		<b>State</b> <i>Ohio</i>	<b>Zip Code</b> <i>44264</i>	<b>Fair Market Value</b> <i>\$6580.00</i>
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Fair Market Value</b>
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Fair Market Value</b>
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>Full Name of Contributor</b>		<b>Employer, Occupation, Labor Organization*</b>		<b>Registration Number, if PAC</b>
<b>Street Address</b>		<b>Description of Item or Service</b>		<b>Date (MM/DD/YYYY)</b>
<b>City</b>		<b>State</b>	<b>Zip Code</b>	<b>Fair Market Value</b>
<b>Received at Fundraising Event?</b> <input type="checkbox"/> Yes <input type="checkbox"/> 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)]

Page Total \$ *149.77*  
~~6649.77~~