



Committee Name Friends of Justin Leonti		Office Sought Green City Council At-Large		District
Street Address 540 E. Nimisila Rd.		City Akron	State OH	Zip 44319
Candidate Name OR PAC Registration Number Justin Leonti		Treasurer Name Laura Leonti		Election Date (MM/DD/YYYY) 11/05/2019

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 2019

Amended Report

No Yes

Termination

Check this box if the committee wishes to terminate with this report

Short Form Report (R.C. 3517.10(H))

Check this box if the committee is filing a short term report. See attached instructions.

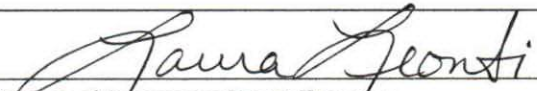
1. Amount brought forward from last report	\$0.00
2. Total monetary contributions (From Forms 31-A and 31-E)	\$1,200.00
3. Total other income (From Form 31-A-2)	\$0.00
4. Total funds available (sum of lines 1, 2, 3)	\$1,200.00
5. Total monetary expenditures (From Forms 31-B and 31-F)	\$502.38
6. Balance on hand (line 4 minus line 5)	\$697.62
7. Value of in-kind contributions received (From Form 31-J-1)	\$0.00
8. Value of in-kind contributions made (From Form 31-J-2)	\$0.00
9. Outstanding loans owed by committee (From Form 31-C)	\$0.00
10. Outstanding debts owed by committee (From Form 31-N)	\$0.00
11. Outstanding loans owed to committee (From Form 31-K)	\$0.00
12. Value of independent expenditures made (From Form 31-U)	\$0.00

OFFICIAL COPY
SUMMIT COUNTY
BOARD OF ELECTIONS

2019 JAN 30 PM 2:10

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


Signature of Treasurer or Deputy Treasurer

01/30/2019

Date (MM/DD/YYYY)

Contribution Pages
4

Expenditure Pages
4

Other Pages
0

Total Pages
8



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Justin Leonti				
Full Name of Contributor Timothy Crawford			Registration Number, if PAC	
Street Address 4109 S. Cleveland Massillon Rd.		Employer/Occupation/Labor Organization* County of Summit		Form (Cash, Check, etc.) Check
City Norton	State OH	Zip Code 44203	Date (MM/DD/YYYY) 03/01/2018	Amount \$100.00
Full Name of Contributor Arlene Doubledee			Registration Number, if PAC	
Street Address 260 29th St. NW		Employer/Occupation/Labor Organization* Ohio Education Association		Form (Cash, Check, etc.) Check
City Barberton	State OH	Zip Code 44203	Date (MM/DD/YYYY) 03/02/2018	Amount \$100.00
Full Name of Contributor Tomislav Stojsavljevic			Registration Number, if PAC	
Street Address 23532 Lakeridge Way		Employer/Occupation/Labor Organization* Self-Employed		Form (Cash, Check, etc.) Check
City Columbia Station	State OH	Zip Code 44028	Date (MM/DD/YYYY) 03/05/2018	Amount \$100.00
Full Name of Contributor Sandy Foyer			Registration Number, if PAC	
Street Address 3081 Champions Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Medina	State OH	Zip Code 44256	Date (MM/DD/YYYY) 03/08/2018	Amount \$50.00
Full Name of Contributor Kyle Monroe			Registration Number, if PAC	
Street Address 260 29th St. NW		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Barberton	State OH	Zip Code 44203	Date (MM/DD/YYYY) 03/08/2018	Amount \$50.00

*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)]

Page Total \$400.00



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Justin Leonti				
Full Name of Contributor Kenneth Press			Registration Number, if PAC	
Street Address 25423 Halburton Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Beachwood	State OH	Zip Code 44122	Date (MM/DD/YYYY) 03/13/2018	Amount \$50.00
Full Name of Contributor Petar Stojisavljevic			Registration Number, if PAC	
Street Address 5999 Edgehill Dr.		Employer/Occupation/Labor Organization* Self-Employed		Form (Cash, Check, etc.) Check
City Parma Heights	State OH	Zip Code 44130	Date (MM/DD/YYYY) 03/13/2018	Amount \$100.00
Full Name of Contributor Susan Ridgeway			Registration Number, if PAC	
Street Address 7685 Mt. Pleasant St. NW		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City North Canton	State OH	Zip Code 44720	Date (MM/DD/YYYY) 03/13/2018	Amount \$50.00
Full Name of Contributor Mabel Randall			Registration Number, if PAC	
Street Address 655 Cliffside Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44313	Date (MM/DD/YYYY) 03/21/2018	Amount \$50.00
Full Name of Contributor Kathleen Dremann			Registration Number, if PAC	
Street Address 655 Cliffside Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44313	Date (MM/DD/YYYY) 03/21/2018	Amount \$25.00

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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Justin Leonti				
Full Name of Contributor Karen Kiss			Registration Number, if PAC	
Street Address 655 Cliffside Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44313	Date (MM/DD/YYYY) 03/21/2018	Amount \$25.00
Full Name of Contributor Catherine Stoyhoff			Registration Number, if PAC	
Street Address 235 Lake Front Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44319	Date (MM/DD/YYYY) 03/22/2018	Amount \$50.00
Full Name of Contributor Laura Leonti			Registration Number, if PAC	
Street Address 122 Wymore Ave.		Employer/Occupation/Labor Organization* Beckfield College		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44319	Date (MM/DD/YYYY) 03/16/2018	Amount \$100.00
Full Name of Contributor Elisa Pizzino			Registration Number, if PAC	
Street Address 1249 Dearborn Dr.		Employer/Occupation/Labor Organization* Attorney		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44313	Date (MM/DD/YYYY) 04/17/2018	Amount \$100.00
Full Name of Contributor Mary Mucklow			Registration Number, if PAC	
Street Address 4882 Mayfair Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City North Canton	State OH	Zip Code 44720	Date (MM/DD/YYYY) 06/07/2018	Amount \$50.00

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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Justin Leonti				
Full Name of Contributor Laura Leonti			Registration Number, if PAC	
Street Address 122 Wymore Ave.		Employer/Occupation/Labor Organization* Beckfield College		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44319	Date (MM/DD/YYYY) 06/08/2018	Amount \$100.00
Full Name of Contributor Dominic Iudiciani			Registration Number, if PAC	
Street Address 21 W. North St. #105		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44304	Date (MM/DD/YYYY) 09/24/2018	Amount \$50.00
Full Name of Contributor Shammas Malik			Registration Number, if PAC	
Street Address 1087 ELLSWORTH DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Akron	State OH	Zip Code 44313	Date (MM/DD/YYYY) 12/07/2018	Amount \$50.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	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)]



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Justin Leonti			
To Whom Paid United States Postal Service		Date (MM/DD/YYYY) 03/14/2018	Amount \$10.00
Street Address 4735 Massillon Rd.		Purpose Stamps	
City Green	State OH	Zip Code 44232	Check Number N/A
To Whom Paid Target		Date (MM/DD/YYYY) 03/14/2018	Amount \$18.44
Street Address 762 Arlington Rd.		Purpose Office Supplies	
City Akron	State OH	Zip Code 44312	Check Number N/A
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 04/11/2018	Amount \$11.00
Street Address PO BOX 630900		Purpose Bank Service Charge	
City Cincinnati	State OH	Zip Code 45263	Check Number N/A
To Whom Paid Square Space Inc		Date (MM/DD/YYYY) 04/26/2018	Amount \$20.00
Street Address 225 Varick St.		Purpose Website	
City New York	State NY	Zip Code 10014	Check Number N/A
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 05/10/2018	Amount \$11.00
Street Address PO BOX 630900		Purpose Bank Service Charge	
City Cincinnati	State OH	Zip Code 45263	Check Number N/A

Page Total \$ 70.44



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Justin Leonti			
To Whom Paid Dominic Iudiciani		Date (MM/DD/YYYY) 03/23/2018	Amount \$50.00
Street Address 21 W. North St. #105		Purpose Headshots	
City Akron	State OH	Zip Code 44304	Check Number 993
To Whom Paid 35 Brix		Date (MM/DD/YYYY) 05/17/2018	Amount \$43.23
Street Address 3875 Massillon Rd		Purpose Meeting	
City Uniontown	State OH	Zip Code 44685	Check Number N/A
To Whom Paid Square Space		Date (MM/DD/YYYY) 05/29/2018	Amount \$124.00
Street Address 225 Varick St.		Purpose Website	
City New York	State NY	Zip Code 11014	Check Number N/A
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 06/12/2018	Amount \$11.00
Street Address PO BOX 630900		Purpose Bank Service Charge	
City Cincinnati	State OH	Zip Code 45263	Check Number N/A
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 07/12/2018	Amount \$11.00
Street Address PO BOX 630900		Purpose Bank Service Charge	
City Cincinnati	State OH	Zip Code 45263	Check Number N/A

Page Total \$ 239.23



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Justin Leonti			
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 08/10/2018	Amount \$11.00
Street Address PO BOX 630900		Purpose Bank Service Charge	
City Cincinnati	State OH	Zip Code 45263	Check Number N/A
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 09/13/2018	Amount \$11.00
Street Address PO BOX 630900		Purpose Bank Service Charge	
City Cincinnati	State OH	Zip Code 45263	Check Number N/A
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 10/11/2018	Amount \$11.00
Street Address PO BOX 630900		Purpose Bank Service Charge	
City Cincinnati	State OH	Zip Code 45263	Check Number N/A
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 11/13/2018	Amount \$11.00
Street Address PO BOX 630900		Purpose Bank Service Charge	
City Cincinnati	State OH	Zip Code 45263	Check Number N/A
To Whom Paid Fifth Third Bank		Date (MM/DD/YYYY) 12/12/2018	Amount \$11.00
Street Address PO BOX 630900		Purpose Bank Service Charge	
City Cincinnati	State OH	Zip Code 45263	Check Number N/A

Page Total \$ 55.00



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Friends of Justin Leonti			
To Whom Paid A-List Promos		Date (MM/DD/YYYY) 12/27/2018	Amount \$137.71
Street Address 1532 E Market St		Purpose Campaign buttons	
City Akron	State OH	Zip Code 44305	Check Number N/A
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number
To Whom Paid		Date (MM/DD/YYYY)	Amount
Street Address		Purpose	
City	State OH	Zip Code	Check Number

Page Total \$ 137.71