

OCT-25-2011 15:02

From: INVEST SERV

To: 96449504

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# USE OF STATE VEHICLES

## Policy Number: 514.0

**Purpose:** Guidance for use of state-owned vehicles to maintain proper documentation and for preventive actions.  
**Revised Date:** February 2005  
**Cross Reference:** Ohio Revised Code 125.832

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### I. State Cars

All persons driving state-owned vehicles must have in his/her possession a valid Ohio driver's license. This license must be shown when obtaining a pool car. Any person who drives a state car or who is a passenger in a state car driven by an authorized state employee is covered by liability insurance.

Staff persons who drive state vehicles are responsible for the maintenance and upkeep of these vehicles. Arrangements should be made for any needed repairs by contacting the Division for authority to have repairs made. If a repair estimate is \$100 or more, the fiscal office is contacted for verbal approval. Repairs must be made at contract sources. Repairs beyond the capability of contract sources or emergency repairs are made by dealers or service stations.

A personally owned vehicle may be used for state business only if a pool car is not available. When a personal vehicle is used, the expense will be reimbursed in accordance with state travel regulations. Information and expense forms are available from the fiscal office.

It is the employee's responsibility to report to his/her immediate supervisor any accident or traffic violation/citation which he/she may have been involved with or received while on state business. The Supervisor's Accident Report form, obtained from your Division, will be completed and submitted in the event of any accident. Employees shall obey all applicable state laws, executive orders, and rules. Failure to do so may result in disciplinary action.

### II. Rules & Regulations for State Vehicles

All persons driving state-owned vehicles must have in his/her possession a valid Ohio driver's license. This license must be shown when obtaining a pool car.

The Trip Ticket (ADM 3263) is to be completed as indicated on the form by each driver of a departmental pool car for each trip taken. The Monthly Report (ADM 3602) must be completed in accordance with Department of Administrative Services (DAS) fleet management reporting requirements by each employee to whom a departmental vehicle has been permanently assigned. The Trip Ticket shall be turned in to the Division of Administration's fiscal officer and the Monthly Report to the employee's supervisor.

Employees who drive state vehicles are responsible for the daily maintenance and upkeep of these vehicles. Arrangements should be made for any needed repairs by contacting the respective division for authority to have repairs made. If a repair estimate is \$10.00 or more, the Division of Administration's fiscal officer must be contacted for verbal approval. Repairs must be made at contract sources. Emergency repairs or repairs beyond the capability of contract sources may be made by dealers or service stations. Mechanical deficiencies of pool cars are to be promptly reported on the Trip Ticket form.

A personally owned vehicle may be used for state business only if a pool car is not available. When a personal vehicle is used, the expense will be reimbursed in accordance with state travel regulations. Information and expense forms are available from the fiscal office.

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Employees who drive state owned vehicles shall ensure that his/her operation of the vehicle is within state and local laws and does not give the appearance of impropriety. Examples of impropriety include, but are not limited to:

- 1) Operating a vehicle in an unsafe manner, including operation of a vehicle while under the influence of alcohol or drugs;
- 2) Unauthorized use of a state credit card;
- 3) Driving without use of seatbelts by driver and/or passenger;
- 4) Abuse of vehicle, including failure to comply with appropriate preventive maintenance requirements;
- 5) Failure to obey traffic laws, including non-payment of traffic tickets;
- 6) Arrest and conviction for serious traffic offense;
- 7) Transporting passengers who are not state employees unless the non-employee's presence in the vehicle is in connection with official state business;
- 8) Transporting passengers who are state employees but who are not on official state business;
- 9) Using state vehicle for activities not approved in advance; and/or
- 10) Failure to file appropriate paperwork as required for use of vehicle.

Operators may be held liable for traffic citations and damages resulting from abuse or neglect. An employee found to have violated this policy will be subject to disciplinary action up to and including removal, and may be required to reimburse the Department for the costs incurred for his/her improper activity. Authorization for a permanently assigned vehicle or pool car may be withdrawn or withheld from any employee who fails to exercise good judgment in the use of a state vehicle.

The operator is responsible for inspecting the vehicle prior to its return to the pool for any damages or defects. Damages from abuse, neglect, or unknown sources are the responsibility of the operator and/or the operator's division.

In addition, receipts for gasoline, oil and maintenance services must be returned to the dispatcher upon completion of the trip.

The driver of a permanently assigned vehicle is responsible for preventative maintenance services and safety checks that must be performed on regular intervals. These include:

Daily Service:

- 1) Check all lights and lenses;
- 2) Check windshield wipers and washer operation;
- 3) Test horn, check mirrors and tires;
- 4) Check all fluid levels; and
- 5) Wash car as needed.

4,000 Mile Service:

- 1) Change oil and filter, clear oil filter cap;
- 2) Check lubricants and condition of transmission, differential and universal joints;
- 3) Lubricate chassis;
- 4) Inspect radiator and water pumps for leaks; check condition of coolant and hoses
- 5) Check all belts for tension and wear;
- 6) Check battery for proper charge and electrolyte levels; and
- 7) Service emission control system as recommended by manufacturer.

12,000 Mile Service:

- 1) Complete all 4,000 mile services;
- 2) Check level of fluid in brake master cylinder;
- 3) Test operation of braking system;
- 4) Check compression on all cylinders;
- 5) Check spark plugs and replace if necessary;
- 6) Check entire ignition system for proper operation and adjustment. If conventional ignition, replace contact points, condenser and rotor;
- 7) Inspect and adjust fuel pump, carburetor, linkage and fuel lines;
- 8) Replace fuel and air filters and PCV valve;
- 9) Check engine oil pressure;
- 10) Check output of charging system and operation of starting system, inspect all wiring;
- 11) Inspect front and rear wheels, drums, rotors, brake lining and wheel cylinders, re-pack wheel bearing at the following intervals: drum brakes 12,000 miles; disc brakes every 24,000 miles, adjust parking brakes;
- 12) Inspect exhaust system;
- 13) Test antifreeze for proper freeze point, flush radiator and engine block and replace the antifreeze every 24,000 miles;
- 14) Inspect air-conditioning system for proper operation; and
- 15) Clean engine compartment.

Vehicle services can be obtained at garages or participating dealers through the state term contract. All tires and tubes must be purchased through the state term contract. The fiscal officer can provide contract information.

Any repairs the operator feels are necessary beyond the scheduled service must have the expressed approval of the fiscal officer before the repairs are made. Any repairs, except emergency, that are accomplished without prior approval will be the responsibility of the operator.

Emergency services are repairs that must be made to restore a vehicle to a safe, drivable condition. Prior approval for this type of repair is not normally required. However, state credit cards have a \$75 limit and repairs costing more will require telephone approval from the fiscal officer. Call (614) 466-6800.

If it is necessary to obtain emergency repair at a service station and this purchase is made through the State of Ohio credit card, a work order must be written by the dealer listing the services performed and the parts and labor expended to complete the repair. The work order should be signed by the driver and a copy must be forwarded to the fiscal officer in the Division of Administration. Finally, the service station attendant should be advised to submit a copy of the work order to the oil company to back up the credit card charge.

No later than four calendar days following the end of the month, a report of all expenses, supported by copies of the work repairs, should be turned in to the fiscal officer in the Division of Administration.

### III. Credit Cards

State of Ohio credit cards will be used with each permanently assigned vehicle and made available to pool car users for gasoline, oil, and emergency repairs. To obtain a State of Ohio credit card, divisions may submit a written request to the fiscal officer in the Division of Administration. One credit card will be issued per vehicle.

Lost or stolen credit cards must be reported to the fiscal officer immediately. This report must include a written confirmation of the date and circumstances. Applications for replacement credit cards will be as specified for initial issue.

When a lost or stolen credit card is found or recovered and a replacement credit card has been issued, the card reported lost or stolen should be forwarded to the fiscal officer without delay.

### IV. Insurance

Liability claims and judgments properly made against state officers' or employees' operation of any state owned motor vehicle in the course of state business, as verified by the appointing authority, will be paid for by the State's Self Insured Program for motor vehicle liability. The limit of liability for bodily injury and property damage is \$1,000,000 per occurrence. This coverage does not apply to:

- 1) bodily injury or property damage caused intentionally by or at the direction of the insured, unless the insured uses intentional but reasonable actions to protect persons or property;
- 2) liability assumed by the insured under any other contract or agreement;
- 3) any obligation for which the insured or the Office of State Insurance Programs may be held liable under any workers' compensation, unemployment compensation or disability benefits laws, or under any similar law;
- 4) any bodily injury or property damage occasioned by the operation of a motor vehicle by a volunteer, or a temporary not classified as an officer or employee of the state, unless covered by an endorsement;
- 5) property damage, injury, or destruction
- 6) property owned by, in charge of, or being transported by the insured, or
- 7) property rented to or in the care, custody or control of the insured, or over which the insured is for any purpose exercising physical control;
- 8) bodily injury or property damage due to war, whether or not declared, civil war, insurrection, rebellion, revolution, or any act or condition incidental to any of the foregoing; but this exclusion does not apply to situations arising under the condition of "State Emergency" and called forth by

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the Governor of the State of Ohio, to engage specific state owned vehicular equipment to act upon that emergency;

- 9) all aircraft whether or not owned;
- 10) any individual who is operating, using, or responsible for his or her own personally owned, rented or leased vehicle;
- 11) any vehicle, including watercraft, if the Federal Tort Claims Act requires the U.S. Attorney General to defend the operator in any civil action or proceeding that may be brought due to its use;
- 12) any individual who is operating under license suspension or revocation; or
- 13) any individual who is driving without a valid drivers license.

Upon being convicted of, or pleading either guilty or no contest to the following violations while operating a state vehicle, the person so charged is subject to immediate cancellation of insurance coverage and may be held liable for costs arising from the violation:

- 1) operating while under the influence of alcohol or drugs;
- 2) operating while under suspension or revocation;
- 3) failure to stop after the accident (hit/skip);
- 4) willfully fleeing from police;
- 5) using motor vehicle in committing a felony;
- 6) drag racing;
- 7) operating without the owner's consent; or
- 8) driving without a valid Ohio Driver's License.

The Office of State Insurance Programs must be notified of court dates in advance and the results of those hearings.

Further information on reinstatement of coverage and alternatives for individuals whose coverage has been terminated are available from the Office of State Insurance Programs (SIPO) at (614) 466-6761.

#### V. Accidents

Whenever an accident occurs which involves a departmental vehicle, the driver must abide by the following procedures, in addition to that which is prescribed by DAS on the Accident Kit envelope located in each departmental vehicle:

- 1) The driver shall telephone SIPO at (614) 466-6761 within one day of the accident. SIPO will handle arrangements with the other party's insurance company. SIPO will furnish an accident claim number which must be included on all reports and correspondence.
- 2) The driver also shall telephone his or her supervisor. If anyone in the departmental vehicle is injured, the supervisor shall complete a Supervisor's Accident Report form. The supervisor or division chief shall send the director a brief memorandum stating whether or not the vehicle was being used on state business at the time of the accident. The appointing authority's signature, verifying authorized use of a state owned vehicle, will be required on all accidents.

A DAS Employees Automobile Accident Report form and the BMV Motor Vehicle Accident Report form are to be found in the glove compartment of each departmental vehicle or the brochure provided to each

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driver of a pool car. Those forms are to be completed by the driver and sent to SIPO within three days of the accident. Three estimates for repair of the departmental vehicle are to be promptly obtained and sent to SIPO. If available, a police, sheriff or patrol report is to be secured as soon as possible and sent to SIPO along with any forms or letters received by insurance companies. Copies of each piece of information described in this paragraph shall be sent to the supervisor, the division chief and Administration Division, attention: safety warden captain. In addition, in case of an accident or other emergency occurrence:

- 1) Render every possible assistance to any injured person(s);
- 2) Do not discuss whose fault the accident was, nor limits of insurance coverage;
- 3) Do not discuss details of the accident with anyone except the investigating law enforcement officer;
- 4) Notify the nearest State Highway Patrol post and request that an investigation be made;
- 5) Obtain names and addresses of all witnesses and person(s) involved;
- 6) Determine and record the name and address of the other person(s) insurance company;
- 7) Notify your supervisor as quickly as possible (accidents occurring after normal working hours may be reported the following day); and
- 8) Obtain name, address, and telephone number of the investigating police department if other than the State Highway Patrol.

Drivers of departmental vehicles are protected from liability as provided by the state's motor vehicle liability insurance program administered by DAS. There is no such insurance coverage from the state, however, for employees who use his/her personal vehicles for state business.

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## ACCIDENT CAUSES

Section A - Unsafe Conditions	
1. Defects of objects, tools, etc. (cracked, broken, frayed, dull, sharp)	2. Lack of personal protective equipment, inadequate, or improper clothing.
3. Inadequate or insufficient workplace, aisles, traffic control, illumination, etc.	4. Hazardous methods of procedures planned, condoned, or directed by supervision.
5. Improper storage or handling of materials.	6. Unguarded or inadequately guarded equipment, etc.
7. Hazards associated with property, premises of others, and public hazards (traffic, etc.)	8. Defective or unsafe equipment (ladders, scaffolding, conveyors, platforms, forklifts, etc.)
9. Improper storage or use of flammable or combustible materials.	10. Improper storage or use of pressurized equipment or materials.
11. Electrical hazard.	12. Contact with other person(s).
13. Unsafe condition, other (explain).	14. Undetermined, insufficient information
15. Health Hazards—e.g., lack of proper ventilation, improper use of solvents or chemicals, improper plant layout, improper operating techniques, improper maintenance, temperature factor, improper disposal procedures, or other engineering controls not followed.	

## GUIDES FOR PREVENTIVE ACTION – "UNSAFE CONDITIONS"

- A. Eliminate, if possible;
- B. Substitute a safer substance, tool, method, procedure, etc.
- C. Guard
- D. Protect the employee (eye, head, body, feet, et c.),
- E. Refer to higher level of management, if necessary,
- F. Follow-up action taken

Section B - Unsafe Acts	
1. Cleaning, oiling or repairing of moving, energized or pressurized equipment.	2. Failure to use available personal protective equipment.
3. Making safety devices inoperative.	4. Operating or working at unsafe speed.
5. Failure to use safe personal attire.	6. Taking unsafe position or posture.
7. Failure to secure or warn.	8. Unsafe placing, mixing, combining, etc.
9. Horseplay; practical joking, startling, etc.	10. Using unsafe equipment – obviously unsafe
11. Inattention to footing; surroundings	12. Unsafe act, other (explain)
13. Improper use of hands or body parts.	14. Undetermined; insufficient information
15. Improper use of equipment; machinery, tools, overloading, etc.	

DW *RW*

## POLITICAL ACTIVITIES

### *Policy Number 204.0*

**Purpose:** To give employees guidelines for participation in political activities for the purpose of ensuring against undue political influence.

**Revised Date:** February 2005

**Cross Reference:** Ohio Revised Code 124.57  
Ohio Administrative Code 123-1-46-02

#### I. General Information

The Department of Commerce adheres to the guidelines issued by the Governor's office, regarding political activities by State employees. Please be advised that state and federal law also provide for fines and/or criminal penalties for unauthorized political activity.

State of Ohio employees' permissible participation in political activity varies depending upon the classification of the employee. Generally, unclassified employees may participate in political activities unless otherwise specifically precluded by federal or state law, while classified employees have stricter limitations on participation. The following are general guidelines regarding State employee participation in political activities. These guidelines are not intended to be exhaustive in scope, but rather to provide general guidance on political participation by State employees.

#### II. Unclassified Employees are Prohibited from:

- 1) Participating in political activity on State time;
- 2) Using state equipment while engaged in political activities, including but not limited to, computer equipment, copiers, bulletin boards, vehicles, telephones or cellular phones;
- 3) Soliciting political contributions from any classified State employees for the financial benefit of a political party or candidate for public office.

#### III. Unclassified Employees are Allowed to:

- 1) Run for part-time non partisan elected office such as school board, city council, or township trustee
- 2) Run for or hold Political party leadership positions such as local or state central committee positions
- 3) Run for full-time elected office

All positions must give prior notice, and receive approval from the Governor's Chief of Staff prior to participating in allowed activities.

Unclassified employees must take a leave of absence from his or her position no later than the date filing the certification of the petitions for the office to which he or she seeks election, or, if the employee does not have an opponent in a primary election, the employee must take a leave of absence no later than July 1 in the year of the general election. The Chief of Staff may authorize an earlier or later leave contingent on how he or she feels the employee's candidacy will affect the ability to fulfill the job responsibilities.

Unclassified employees who wish to participate in political activities during normal business hours must utilize his/her lunch hour, leave without pay, vacation time, compensatory leave or personal leave.

#### IV. Classified Employees are Prohibited from:

(See generally O.R.C. 124.57 and O.A.C. 123-1-46-02)

- 1) Participating in partisan political activities; including elections involving primaries and partisan ballots.
- 2) Participating in or declaring to be a candidate for public office in a partisan campaign;
- 3) Campaigning by writing for publications, by distributing political material, or by writing or making speeches on behalf of a candidate of a partisan elective office;
- 4) Being a candidate for public office in a non-partisan general election if the nomination to candidacy was obtained in a partisan primary or through the circulation of nominating petitions identified with a political party;
- 5) Soliciting political contributions from any State employee;
- 6) Receiving or collecting money for a partisan campaign;
- 7) Soliciting contributions or selling political party fundraising tickets;
- 8) Holding office, elected or appointed, in a political party or within a partisan candidate's campaign organization;
- 9) Participating in a political action committee or a political caucus which supports partisan activity;
- 10) Circulating nominating petitions in partisan election;
- 11) Distributing partisan political material.

#### V. Classified Employees are Allowed to:

- 1) Register to vote and vote;
- 2) Voluntarily contribute to political candidates or organizations;
- 3) Attend political rallies on personal time;
- 4) Sign nominating petitions in support of individuals;
- 5) Express written and oral opinions;
- 6) Display political materials at home or on own personal vehicle; and
- 7) Wear political badges or buttons.
- 8) Circulate non-partisan petitions relating to legislation on his/her own time;
- 9) Serve as poll workers on his/her own time

Officials and employees have a right to express his/her personal opinions freely. However, state officials and employees must be careful to ensure that no taxpayer dollars are spent to advocate for or against a ballot issue, or to express a personal opinion as a "State of Ohio" position. As employees disseminate information or answer questions, they must keep in mind that the information they provide as a state employee, on state time or with state resources, must be objective and must leave, for the voter, the final interpretation of the information- that is, whether to vote for or against an issue on the ballot.

All State of Ohio employees are strictly prohibited from using State time, facilities or resources for political purposes.

All State of Ohio employees under the supervision and control of the Governor, directly or indirectly, are prohibited from soliciting other State employees for any political contributions.

This policy is intended for general procedural review and is a representative portion of Ohio's Political Activity Policy. The state of Ohio's Political Activity Policy governs all state agencies and should be reviewed in order to obtain a comprehensive understanding of this policy.

<b>NEWTON FALLS POLICE</b>						<b>Incident Number</b>
19 N CANAL ST 330-872-5757						<b>11-00756</b>
<i>Uniform Incident / Offense Report</i>						
In Progress	Method Received	Time Received	Time Dispatched	Time Arrived	Time Cleared	Complainant's Phone.
NO	IN PERSON	0932	0934	0934	0934	
Report Date / Time		Incident Occurred From		Incident Occured To		
Date	Time	Date	Time	Date	Time	
Wednesday 09/07/2011	1045	Friday 09/02/2011	0730	Wednesday 09/07/2011	0900	
Location of the Incident (Street #, Street. Apt. #, City, State, Zip)						Zone
321 S MILTON BLVD NEWTON FALLS OH 44444 - FALLS CONVIENENT						5
Persons: RICHARD A LISUM - PRP Involved: GIDEON A FETTEROLF - SUS 4 HAYTHAM I ALSHAFIE - VIC MIKE SALEH - WIT				Property: 0 Amount: 0.00		
Units:		Officers:				
1st:	0204	SGT Richard A Lisum				
2nd:						
3rd:						
4th:						
5th:						
Report:	204	SGT Richard A Lisum			Photos:	0
					Arrests:	0
Codes:	Descriptions:	OFFENSES				
8999	DEPARTMENTAL INFORMATION (FREE TEXT)					
2199	EXTORTION (FREE TEXT)					
Weapons Used:		Trade Marks:			Hate Bias	
None					NO	
Entry:				Location Type:		
				Convenience Store		
Refer to Arrest:	Incident #:	Tow#:	Dispatcher:	Officer in Charge:	Entry Id:	
			0213	0204	0213	
Case Status:	Not Cleared	Cleared Date:	/ /	Cleared By:		
<b>Narrative: 11-00756 Page: 1</b>						
<p>I stopped at Falls Convenient for community policing on or about 9-2-2011. While there, Mike, the manger of the establishment, told me he heard our Chief made \$85000 a year . I told him 'I didn't know, but that seemed high. He stated an older gentleman named Bud had told him this. I asked if Bud's last name was Fetterolf and he stated he thought so. We then discussed Fetterolf's running for mayor. Mike gave me the impression he was impressed with Bud. I sometimes have a hard time understanding Mike because of his thick accent, but I thought he said something to the effect he made or was going to make a contribution to Fetterolf's campaign. I couldn't understand the amount given or even if one was mentioned.</p>						
FOOR BRIAN			Richard A Lisum			
Reviewing Supervisor:			Bureau Supervisor:		Officer:	

**NEWTON FALLS POLICE**

Incident Number

Page # 1

Persons Involved with Incident

11-00756

<b>Incident #:</b>	<b>Master Number:</b>	<b>Relation:</b>	<b>Arrest #:</b>	<b>Date of Contact:</b>			
1100756	001	Person Reporting		09/07/2011			
<b>Last Name:</b>	<b>First Name:</b>	<b>Mi:</b>	<b>Til:</b>	<b>DOB:</b>	<b>SSN:</b>	<b>Cell Phone:</b>	<b>Pager:</b>
LISUM	RICHARD	A		05/10/1957	289547651		
<b>Street #:</b>	<b>Street Name:</b>	<b>Apt:</b>	<b>City:</b>	<b>St:</b>	<b>Zip:</b>	<b>Phone:</b>	<b>Employee Phone:</b>
19	N CANAL ST		NEWTON FALLS	OH	44444	330-872-5757	330-872-5757
<b>Hgt:</b>	<b>Wgt:</b>	<b>Hair:</b>	<b>Eyes:</b>	<b>Race:</b>	<b>Sex:</b>	<b>Physical Marks:</b>	
						M	
<b>Offenses:</b>	2199	EXTORTION (FREE TEXT)					
	8999	DEPARTMENTAL INFORMATION (FREE TEXT)					
<b>Resident Class:</b>	<b>Suspected of using:</b>					<b>Victim Type:</b>	
	/					/	

<b>Incident #:</b>	<b>Master Number:</b>	<b>Relation:</b>	<b>Arrest #:</b>	<b>Date of Contact:</b>			
1100756	002	Suspect		09/07/2011			
<b>Last Name:</b>	<b>First Name:</b>	<b>Mi:</b>	<b>Til:</b>	<b>DOB:</b>	<b>SSN:</b>	<b>Cell Phone:</b>	<b>Pager:</b>
FETTEROLF	GIDEON	A		05/30/1943	274368886		
<b>Street #:</b>	<b>Street Name:</b>	<b>Apt:</b>	<b>City:</b>	<b>St:</b>	<b>Zip:</b>	<b>Phone:</b>	<b>Employee Phone:</b>
321	RIDGE RD		NEWTON FALLS	OH	44444		
<b>Hgt:</b>	<b>Wgt:</b>	<b>Hair:</b>	<b>Eyes:</b>	<b>Race:</b>	<b>Sex:</b>	<b>Physical Marks:</b>	
600	180	GRY	BLU	W	M		
<b>Offenses:</b>	8999	DEPARTMENTAL INFORMATION (FREE TEXT)					
	2199	EXTORTION (FREE TEXT)					
<b>Resident Class:</b>	<b>Suspected of using:</b>					<b>Victim Type:</b>	
	/					/	

<b>Incident #:</b>	<b>Master Number:</b>	<b>Relation:</b>	<b>Arrest #:</b>	<b>Date of Contact:</b>			
1100756	003	Victim		09/07/2011			
<b>Last Name:</b>	<b>First Name:</b>	<b>Mi:</b>	<b>Til:</b>	<b>DOB:</b>	<b>SSN:</b>	<b>Cell Phone:</b>	<b>Pager:</b>
ALSHAFIE	HAYTHAM	I		02/05/1954	275085071		
<b>Street #:</b>	<b>Street Name:</b>	<b>Apt:</b>	<b>City:</b>	<b>St:</b>	<b>Zip:</b>	<b>Phone:</b>	<b>Employee Phone:</b>
1597	CLERMONT AVE NE		WARREN	OH	44483		
<b>Hgt:</b>	<b>Wgt:</b>	<b>Hair:</b>	<b>Eyes:</b>	<b>Race:</b>	<b>Sex:</b>	<b>Physical Marks:</b>	
						B M	
<b>Offenses:</b>	2199	EXTORTION (FREE TEXT)					
	8999	DEPARTMENTAL INFORMATION (FREE TEXT)					
<b>Resident Class:</b>	<b>Suspected of using:</b>					<b>Victim Type:</b>	
Unkown	/					Individual	

Reviewing Supervisor:

Bureau Supervisor:

Officer:

**NEWTON FALLS POLICE**

Incident Number

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Persons Involved with Incident

11-00756

**Incident #:** 1100756    **Master Number:** 004    **Relation:** Witness    **Arrest #:**    **Date of Contact:** 09/07/2011  
**Last Name:** SALEH    **First Name:** MIKE    **Mi:**    **Til:**    **DOB:** //    **SSN:**    **Cell Phone:**    **Pager:**  
**Street #:** 321    **Street Name:** S MILTON    **Apt:**    **City:** NEWTON FALLS    **St:** OH    **Zip:** 4444    **Phone:**    **Employee Phone:**  
**Hgt:**    **Wgt:**    **Hair:**    **Eyes:**    **Race:**    **Sex:**    **Physical Marks:**  
**Offenses:** 2199    EXTORTION (FREE TEXT)  
8999    DEPARTMENTAL INFORMATION (FREE TEXT)  
**Resident Class:**    **Suspected of using:** /    **Victim Type:**

\_\_\_\_\_  
**Reviewing Supervisor:**

\_\_\_\_\_  
**Bureau Supervisor:**

\_\_\_\_\_  
**Officer:**

**NEWTON FALLS POLICE**

Incident Number

Investigative Report

Title / Subject: Departmental info

**11-00756**

I stopped at Falls Convenient for community policing on or about 9-2-2011. While there, Mike, the manger of the establishment, told me he heard our Chief made \$85000 a year . I told him 'I didn't know, but that seemed high. He stated an older gentleman named Bud had told him this. I asked if Bud's last name was Fetterolf and he stated he thought so. We then discussed Fetterolf's running for mayor. Mike gave me the impression he was impressed with Bud. I sometimes have a hard time understanding Mike because of his thick accent, but I thought he said something to the effect he made or was going to make a contribution to Fetterolf's campaign. I couldn't understand the amount given or even if one was mentioned.

By: SGT Richard A. Lisum

Badge# 204

Date: 09/07/2011 Time: 1033

No. 001 Page #: 1

Reviewing Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

**NEWTON FALLS POLICE**

Incident Number

Investigative Report

Title / Subject: Follow up

**11-00756**

On 09/08/2011 I spoke to Mike who is the manager of convenient food mart. I was talking to Mike about the talk he had with Gideon Bud Fetterolf on 08/30/2011. Mike told me he came in and introduced himself. Mike said he gave him his liquor control business card and said he had a meeting with Amar who owns the business. He said while they waited for Amar, Bud was talking about his running for political office. Mike told me Bud said the chief made around \$80,000. Mike advised me Amar showed up and then Amar and Bud met in the back office for sometime and was given a campaign donation. I told Mike I would have the chief come in and he could clear up any questions he had for him.

By: OFF Andy J. Harvey

Badge# 222

Date: 09/12/2011 Time: 0726

No. 002 Page #: 1

Reviewing Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

**NEWTON FALLS POLICE**

**Incident Number**

**Investigative Report**

**Title / Subject:** Follow up recorded

**11-00756**

On 09/12/2011 while following up on the investigation, I went to Falls Convenience and spoke to the manager Mike. This was done in the presence of Chief Kuivila and FBI agent Tony Santos. Mike spoke of the day when Gideon Bud Fetterolf came to the store and was given a campaign donation after he had given his liquor control business card.

By: OFF Andy J. Harvey

Badge# 222

Date: 09/12/2011 Time: 1519

No. 003 Page #: 1

Reviewing Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

172-DIRECTOR OF LAW (HUBBARD) 1/1/2012 - 12/31/2015	MARK A. VILLANO - DEM	MARK A VILLANO 143 MAPLELEAF DR HUBBARD OH 44425	4
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173-PRESIDENT OF COUNCIL (HUBBARD) 1/1/2012 - 12/31/2013	WILLIAM J. WILLIAMS - DEM	WILLIAM J WILLIAMS 168 BELLE VISTA AVE HUBBARD OH 4442 5	2
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CANDIDATE DETAIL S TRUMBULL COUNTY GENERAL ELECTION - NOVEMBER 8, 2011 1 5  
Run Date: 10/3/2011  
4:18:0 1PM Board Certified 8 /19/2011

OFFICE TITLE	CANDIDATE'S NAME / PARTY	NAME / ADDRESS CITY /STATE /ZIP	TERM LENGTH
175-COUNCIL AT LARGE (HUBBARD) 1/1/2012 - 12/31/2013	JEROME CROWE - DEM	JEROME C CROWE 373 SCOTT ST HUBBARD OH 44425	2

175-COUNCIL AT LARGE (HUBBARD) 1/1/2012 - 12/31/2013	RAYMOND L. MOFFITT - DEM	RAYMOND L MOFFITT 804 WOODLAND ST HUBBARD OH 4442 5	2
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175-COUNCIL AT LARGE (HUBBARD) 1/1/2012 - 12/31/2013	JUSTIN SILVIDI - DEM	JUSTIN D SILVIDI 115 FOREST HILL DR HUBBARD OH 4442 5	2
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176-MEMBER OF COUNCIL (HUB-1ST WARD ) 1/1/2012 - 12/31/2013	BONNIE VIELE - DEM	BONITA L VIELE 161 FOX S T HUBBARD OH 44425	2
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177-MEMBER OF COUNCIL (HUB-2ND WARD ) 1/1/2012 - 12/31/2013	TIMOTHY E. O'HARA - DEM	TIMOTHY E OHAR A 610 CREEKSIDE DR HUBBARD OH 44425	2
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178-MEMBER OF COUNCIL (HUB-3RD WARD) 1/1/2012 - 12/31/2013	LISHA POMPILI-BAUMILLER - DEM	LISHA A POMPILI-BAUMILLER 335 CENTER ST HUBBARD OH 4442 5	2
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179-MEMBER OF COUNCIL (HUB-4TH WARD) 1/1/2012 - 12/31/2013	DAN HAVALO - DEM	DANIEL C HAVALO 87 HILLVIEW DR HUBBARD OH 4442 5	2
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179-MEMBER OF COUNCIL (HUB-4TH WARD) 1/1/2012 - 12/31/2013	MICHAEL P. LYNCH H	MICHAEL PATRICK LYNCH 468 JONES S T HUBBARD OH 4442 5	2
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180-MAYOR (NEWTON FALLS ) 1/1/2012 - 12/31/2015	WRITE - IN CANDIDAT E	GIDEON A FETTEROL F 321 RIDGE RD NEWTON FALLS OH 44444	4
--	-----------------------	--	---

180-MAYOR (NEWTON FALLS) 1/1/2012 - 12/31/2015	LYLE A. WADDELL	LYLE WADDELL 2404 EAST RIVER RD NEWTON FALLS OH 44444	4
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183-MEMBER OF COUNCIL (NF-2ND WARD) 1/1/2012 - 12/31/2015	NANCY HOFFMAN-DEM	NANCY H HOFFMAN 520 HIGH ST NEWTON FALLS OH 44444	4
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183-MEMBER OF COUNCIL (NF-2ND WARD) 1/1/2012 - 12/31/201 5	WRITE - IN CANDIDATE	MARY SUSIE LANE 8 OLIVE S T NEWTON FALLS OH 44444	4
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**GIDEON "BUD" FETTEROLF**

*"The most practical kind of politics is the politics of decency."  
Theodore Roosevelt*



*FWII Yet Gideon Fetterolf and son, Nery Yet Gideon "Bud" Fetterolf Write In Candidate for Newton Falls Mayor*

*"We have to stop the bleeding, when your in a hole, stop digging!" Fetterolf on Spending*

**WRITE IN CANDIDATE FOR MAYOR OF NEWTON FALLS**

Paid for by Gideon A. Fetterolf Jr, Treasurer,  
321 Ridge Rd, Newton Falls, Oh.  
330 299 1779 ★ Bud44444@aol.com.

Deliver to Current Occupant and/or

How to cast a write in vote. Select Write-In next to the list of candidates. A key board will appear on the screen. Type in the name of the candidate. Touch "Cast Ballot" when you are ready to record your vote. If you are using a paper ballot or an absentee ballot, simply write in the candidates name in the appropriate box.

**OK, BUT HOW DO I PLAN ON DOING THIS?**

cause of "We always did it that way."  
The old Baseline Budget accepting the expense without question and providing an increase each year is what got us in this mess. The purpose of Government is to provide necessary services, not see how much money it can spend or how many people it can employ. The only money the government has is what is taken from you.

You the Newton Falls citizen own the water, sewer and electric utilities. You paid for them; you own them and set the expenses and rates charged. No one else is in control not the State of Ohio Public Utilities Commission or any Board of Directors who have to show a profit for the stockholders.

We can set rates for utilities and services that will attract business and developers to our community, reducing the cost for everyone. I can not do this by myself, no one person can.

The City Council you elect and your active participation in letting them know what you want is the only way we can get out of the hole.

I am asking for your write in Vote for Mayor, as head of Council, I will represent you the citizen of the once again Village of Newton Falls.

## WHO IS GIDEON "BUD" FETTEROLF?

I am the oldest of 5 boys raised in Newton Falls by Gideon Sr. and Kathryn Fetterolf. I graduated from Newton Falls High School in 1962, where I was active in High School Band, Speech Contests, Boy Scouts, Methodist Youth Fellowship, Trumbull County Civil Defense as a SCUBA Diver and joined the U.S. Navy Reserve in my Junior year.

I am a U.S. Navy veteran, former State of Ohio Certified full time Police Officer with Newton Falls Police Dept, Kent State University Police Dept., Portage County Sheriff Dept. and Dept. of Liquor Control Enforcement Investigator.

I was also a Public speaker for the Department of Liquor Control Teen Age Preventative Drinking Program and Liquor Investigation instructor/speaker at Law enforcement training schools and conferences.

October 31, 2011 I retired from the Division of Liquor Control, Department of Commerce, as a Compliance Officer with over 40 years experience assisting retail, wholesale and manufacturers in the alcoholic beverage industry. I represented the Division of Liquor Control providing liaison with County, Township, Municipal, Village officials and departments in addition to Civic, Educational and

## WHY DO I WANT YOUR VOTE FOR MAYOR?

I grew up in Newton Falls, this is my hometown, lifelong friends and family live here. My father instilled in all of his boys the responsibilities of being an American citizen. We grew up with the knowledge of the cost of freedom paid for by the members of the Armed Forces and veterans. Dad has never taken their sacrifices for granted, neither do I.

The government has moved away from representing the citizen paying for services. The citizen taxpayer is now only viewed as a source of income for the expansion of programs controlling or restricting our lives. There is no consideration of how the additional expenses will affect your life.

I know from past experience the citizens of Newton Falls can take care of them selves with out a "Big Brother" government directing how to spend every dollar we earned.

## OK, BUT HOW DO I PLAN ON DOING THIS?

The Mayor and City Council have to stop the bleeding. When you are in a hole, stop digging. Newton Falls has to change to a Zero Base Budget; every item has to be evaluated for necessity vs. cost. Many of the expenses have increased simply be-

Religious Organizations as part of my duties. I also represented the Division of Liquor Control in Criminal, Civil and Ohio Liquor Commission hearings.

I was Chairman of the Newton Falls Political Action Committee that successfully sponsored the recall elections of Councilmen and was successful in providing the defense of the Constitutional rights of the Citizens resulting in a favorable decision by the State of Ohio Supreme Court.

I am a past member of the Newton Falls Rotary Club where I served as President. I have served on the past 3 Charter Review Commissions and for a short time was on the Planning and Zoning Commission.

Suzy (Miller), Newton Falls High School Class of 1966 and I have been married for over 28 years.

Suzy and I owned and operated Mom's Restaurant on N. Canal St for two years, until the tornado in 1985. We were active in the Newton Falls Youth Soccer League as a parent and sponsor, I am a former trustee. We were active boosters of the Newton Falls High School Girls Soccer Team 2001-2005.

Suzy and I have children; Wendi Lopez, husband Jim, Gideon (Bud) wife Jackie, Gloria Hodges, husband Allie, Madison and Maggie.

<b>NEWTON FALLS POLICE</b>						<b>Incident Number</b>
19 N CANAL ST 330-872-5757						<b>11-00849</b>
<i>Uniform Incident / Offense Report</i>						
In Progress <b>NO</b>	Method Received <b>IN PERSON</b>	Time Received <b>1230</b>	Time Dispatched <b>1230</b>	Time Arrived <b>1254</b>	Time Cleared <b>1254</b>	Complainant's Phone.
Report Date / Time		Incident Occurred From		Incident Occurred To		
Date	Time	Date	Time	Date	Time	
Thursday 10/13/2011	0736	Wednesday 10/12/2011	0800	Wednesday 10/12/2011	1230	
Location of the Incident (Street #, Street, Apt. #, City, State, Zip)						Zone
<b>W BROAD ST CHASE BANK EXIT NEWTON FALLS OH 44444 -</b>						<b>2</b>
Persons: <b>GIDEON A FETTEROLF - PRP</b> Involved: <b>BRETT M GODFREY - OIV</b> <b>2</b>				Property: <b>0</b> Amount: <b>0.00</b>		
Units: Officers:						
1st:	<b>0202</b>	<b>OFF David Garvey</b>				
2nd:						
3rd:						
4th:						
5th:						
Report:	<b>202</b>	<b>OFF David Garvey</b>			Photos:	<b>7</b>
		Arrests:		<b>0</b>		
Codes:	Descriptions:	OFFENSES				
<b>8999</b>	<b>DEPARTMENTAL INFORMATION (FREE TEXT)</b>					
Weapons Used:		Trade Marks:			Hate Bias	
<b>None</b>					<b>NO</b>	
Entry:				Location Type:		
				<b>Yard</b>		
Refer to Arrest:	Incident #:	Tow#:	Dispatcher:	Officer in Charge:	Entry Id:	
			<b>0213</b>	<b>0204</b>	<b>0213</b>	
Case Status:	<b>Closed</b>	Cleared Date:	<b>10/12/2011</b>	Cleared By:	<b>202</b>	
<b>Narrative: 11-00849 Page: 1</b>						
Comp came to station to report that someone stole his political sign which was located on private property on the Ferrence property located across from the Broad St McDonalds exit/entrance.						
Sign was last seen at approx 2100 hrs yesterday and comp just found it missing. Measures 4'x4' white with black block lettering. "Write In" Gideon Fetterolf for mayor.						
Sign was on 4x6 landscape timbers and the timbers are also missing. Value approx \$150.00.						
2nd phone number is 330-360-8241.						
KUIVILA JOHN			David Garvey			
Reviewing Supervisor:			Bureau Supervisor:		Officer:	

**Narrative:** 11-00849 **Page:** 2

At 1253 comp came back to PD to advise that he has learned that the Zoning Officer, Brett Godfrey had the sign removed with assistance of Harry Shaver.

IT WAS REPORTED TO THIS OFFICER, THAT ONE GIDEON FETTEROLF, ARRIVED ON STATION IN HIS STATE OWNED VEHICLE, TO FILE A REPORT THAT HIS POLITICAL SIGN HAD BEEN STOLEN FROM THE AREA OF THE WATER TOWER.

ACCORDING TO VILLAGE ZONING INSPECTOR, BRETT GODFREY THE SIGN IN QUESTION WAS OVERSIZED ACCORDING TO VILLAGE ZONING REGUALTIONS, AND WAS REMOVED BY ZONING INSPECTOR.

NO FURTHER ACTION REQUIRED BY THIS DEPARTMENT IS WARRANTED.

KUUVILA JOHN

Reviewing Supervisor:

Bureau Supervisor:

David Garvey

Officer:

**NEWTON FALLS POLICE**

**Incident Number**

**Page #** 1

*Persons Involved with Incident*

**11-00849**

**Incident #:** 1100849    **Master Number:** 001    **Relation:** PERSON REPORTING    **Arrest #:**    **Date of Contact:** 10/12/2011

**Last Name:** FETTEROLF    **First Name:** GIDEON    **Mi:** A    **Til:**    **DOB:** 05/30/1943    **SSN:** 274368886    **Cell Phone:**    **Pager:**

**Street #:** 321    **Street Name:** RIDGE RD    **Apt:**    **City:** NEWTON FALLS    **St:** OH    **Zip:** 44444    **Phone:** 330-399-1779    **Employee Phone:**

**Hgt:** 600    **Wgt:** 180    **Hair:** GRY    **Eyes:** BLU    **Race:** W    **Sex:** M    **Physical Marks:**

**Offenses:**

**Resident Class:**    **Suspected of using:**    **Victim Type:**

**Incident #:** 1100849    **Master Number:** 002    **Relation:** Other Involved    **Arrest #:**    **Date of Contact:** 10/13/2011

**Last Name:** GODFREY    **First Name:** BRETT    **Mi:** M    **Til:**    **DOB:** 09/03/1958    **SSN:** 302563476    **Cell Phone:**    **Pager:**

**Street #:** 19    **Street Name:** N CANAL ST    **Apt:**    **City:** NEWTON FALLS    **St:** OH    **Zip:** 44444    **Phone:** 330-872-3157    **Employee Phone:**

**Hgt:** 509    **Wgt:** 200    **Hair:** BRO    **Eyes:** BLU    **Race:** W    **Sex:** M    **Physical Marks:**

**Offenses:** 8999 DEPARTMENTAL INFORMATION (FREE TEXT)

**Resident Class:**    **Suspected of using:**    **Victim Type:**

**Reviewing Supervisor:** \_\_\_\_\_

\_\_\_\_\_

**Officer:** \_\_\_\_\_

**NEWTON FALLS POLICE**

Incident Number

Investigative Report

Title / Subject: REPORT

**11-00849**

IT WAS REPORTED TO THIS OFFICER, THAT ONE GIDEON FETTEROLF, ARRIVED ON STATION IN HIS STATE OWNED VEHICLE, TO FILE A REPORT THAT HIS POLITICAL SIGN HAD BEEN STOLEN FROM THE AREA OF THE WATER TOWER.

ACCORDING TO VILLAGE ZONING INSPECTOR, BRETT GODFREY THE SIGN IN QUESTION WAS OVERSIZED ACCORDING TO VILLAGE ZONING REGULATIONS, AND WAS REMOVED BY ZONING INSPECTOR.

NO FURTHER ACTION REQUIRED BY THIS DEPARTMENT IS WARRANTED.

By: OFF David . Garvey

Badge# 202

Date: 10/13/2011 Time: 0743

No. 001 Page #: 1

Reviewing Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

**NEWTON FALLS POLICE**

Incident Number

Investigative Report

Title / Subject: NARRATIVE/KUIVILA

**11-00849**

On October 13, 2012 at about 1035 hours Mr. Fefferolf was walking out of the back door to city hall. Mr. Fetterolf made the comment to the court security officer that: "there is definitely going to be some changes after the first of the year". Mr. Fetterolf then walked by Officer Zimomra and I and made the same comment. Furthermore, the court security officer gave me a flier that was given to him by Mr. Fetterolf when he arrived at City Hall. This flier campaign material for his write in candidacy.

By: Chief John M. Kuivila

Badge# 201

Date: 10/13/2011 Time: 1043

No. 002 Page #: 1

Reviewing Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

**NEWTON FALLS POLICE**

Incident Number

Investigative Report

Title / Subject: Narrative/Foor

**11-00849**

On 10/13/2011 at approximately 1830hr Chief Kuivila called the station for the Officer In Charge. Since answered the phone it was obvious who the OIC was. Chief Kuivila informed me of the situation regarding the removal of Gideon Fetterolf's sign on 10/12/2011.

Chief Kuivila instructed me to drive out to Brett Godfrey's residence photograph the political sign placed across the street from his home and take the sign into evidence. Upon arrival I found a home made "Gideon Fetterolf for Mayor" campaign sign. This sign was a 4X4 sheet of plywood bolted to 8" landscape timbers. The legs of the sign were approximately 18 inches in the ground. This sign was installed not so traffic could see/read the sign it was positioned so it faced Brett Godfrey's home. The sign was photographed, measured and removed at he order of the zoning inspector Brett Godfrey and Chief Kuivila. We obtained an electric dept truck and transported the sign to the station where it was placed in the garage as evidence.

By: SGT Brian . Foor

Badge# 206

Date: 10/13/2011 Time: 2149

No. 003 Page #: 1

Reviewing Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

30-A  
R.C. 1517.10

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <b>Gideon A. Fetterolf Jr.</b>		Registration Number, if PAC	
Full Name of Candidate <b>Gideon A. Fetterolf Jr.</b>			
Street Address <b>321 Ridge Rd</b>		Office Sought <b>MAYOR</b>	District <b>Newton Falls Village</b>
City <b>Newton Falls</b>		State <b>OH</b>	Zip Code <b>44444</b>
Type of Report (Check 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"/> July Monthly	<input type="checkbox"/> August Monthly	<input type="checkbox"/> September Monthly
	<input type="checkbox"/> Annual Year	<input type="checkbox"/> Post-General	<input type="checkbox"/> Termination
	<input type="checkbox"/> Semiannual	Date of Report <b>11 08 20 11</b>	
Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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	\$	<u>0</u>
2. Total monetary contributions (From Form No. 31-A)	\$	<u>2148.43</u>
3. Total other income (From Form No. 31-A-2)	\$	<u>0</u>
4. Total funds available (sum of lines 1, 2, 3)	\$	<u>2148.43</u>
5. Total monetary expenditures (From Form No. 31-B)	\$	<u>1066.75</u>
6. Balance on hand (line 4) minus line 5)	\$	<u>1081.68</u>
7. Value of in-kind contributions received (From Form No. 31-A-3)	\$	
8. Value of in-kind contributions made (From Form No. 31-B-2)	\$	
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	
10. Outstanding debts owed to committee (From Form No. 31-D)	\$	
11. Outstanding loans owed to committee (From Form No. 31-E)	\$	
12. Value of in-kind expenditures (From Form No. 31-B-3)	\$	
13. For Information Only (Not Reported)	\$	

1162.78  
985.65  
2011 OCT 21 AM 11:51  
RECEIVED  
OFFICE OF ELECTORAL  
COMMISSIONERS

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.

**Gideon A. Fetterolf Jr.**      *Gideon A. Fetterolf*      **10-31-11**  
Print Name and Title (Treasurer and Deputy Treasurer only)      Signature      Date

Contribution pages <u>1</u>	Expenditure pages <u>2</u>	Other pages <u>0</u>	Total pages <u>3</u>
-----------------------------	----------------------------	----------------------	----------------------

31-A  
R.C. 3517.10

less \$100  
cont.

Page 1

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Contributor in Full		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Gideon A. Fetterolf JR		Candidate Filling W/ Bd. Election.		CASH.	
Gideon A. Fetterolf JR.		OH 44444		072011 45.00	
321 Ridge Rd		Candidate		CASH	
Newton Falls, OH		OH 44444		072911 50.00	
Gideon A. Fetterolf JR.		Candidate		CASH	
321 Ridge Rd		Candidate		CASH	
Newton Falls		OH 44444		072911 50.00	
Gideon A. Fetterolf JR.		Candidate		CASH	
321 Ridge Rd		Candidate		CASH	
Newton Falls		OH 44444		072911 5.00	
Gideon A. Fetterolf JR.		Candidate		CASH	
321 Ridge Rd		Candidate		CASH	
Newton Falls		OH 44444		080111 38.43	
Gideon A. Fetterolf JR.		Candidate (from P.A.Y. Bill)		CASH	
321 Ridge Rd		Candidate (from P.A.Y. Bill)		CASH	
Newton Falls		OH 44444		090211 500.00	
NOALG ATWAY & SUIHA ALI ATWAY		Candidate		CHECK	
5900 CHERRY WAY		Candidate		CHECK	
BOARDMAN, OH 44512		OH 44512		080611 500.00	
YASSER Aljadi		Candidate		CHECK	
318 MILTON BLVD		Candidate		CHECK	
Newton Falls		OH 44444		083011 1,000.00	

\* 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(D)(4)]

2148.43  
Page Total \$0.00

31-B  
R.C. 3517.10

check  
8.5.11  
2011

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 1

Name of Contributor in Full		M		D		Y		Amount
Gideon A. FETTEROLF, JR		07		29		11		50.00
To Whom Paid	Associated School Employees Credit Union	M		D		Y		Amount
Address	22 S. CANAL ST	OH		44444		CASH		
Purpose	OPEN CHECKING ACCOUNT FOR COMMITTEE	M		D		Y		Amount
To Whom Paid	Associated School Employees Credit Union	9		29		11		5.00
Address	22 S. CANAL ST	OH		44444		CASH		
Purpose	SAVINGS ACC REQUIRED FOR CHECKING ACCOUNT	M		D		Y		Amount
To Whom Paid	Trumbull County Board of Election	07		20		11		45.00
Address	YOUNGSTOWN RD	OH		44481		CASH		
Purpose	Filing fee WARE IN STATEMENT FOR MAYOR RET # 90	M		D		Y		Amount
To Whom Paid	STAR SUPPLY BARGAIN OUTLET							38.45
Address	875 MAHONEY AV	OH		44502		CASH		
Purpose	PAPER FOR SIGNS	M		D		Y		Amount
To Whom Paid	Home Depot	9		12		11		81.63
Address	6100 MAHONEY AV.	OH		44515		101		
Purpose	NUMBER & MISC. FOR SIGNS	M		D		Y		Amount
To Whom Paid	Trumbull County Board of Election	9		14		11		7.65
Address	YOUNGSTOWN RD	OH		44481		102		
Purpose	ADDRESS LABELS	M		D		Y		Amount
To Whom Paid	PAT CATAN'S CRAFT CENTER	9		14		11		30.11
Address	1923 RIDGE RD	OH		44482		103		
Purpose	STENCILS & INK FOR SIGNS	M		D		Y		Amount
To Whom Paid	FAIR PRICE ACE HDQ	9		21		11		36.20
Address	165 E BROAD ST	OH		44444		104		
Purpose	PAINT FOR SIGN							

294.02  
Page Total: \$0.00

31-B  
R.C. 3517.10

*check 85<sup>00</sup> R. 5/11/11*

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 2

CHECK VOID

Name of Committee in Full							
Gideon A. FETTEROLF, JR							
To Whom Paid				M	D	Y	Amount
ANN PRINTING AND PROMOTIONS INC				0	9	23	524 <sup>01</sup>
Address		Purpose		Check Number			
269 E. MARKET ST		100 YARD SIGNS		105			
City	State	Zip Code	Check Number				
WARREN	OH	44481	105				
To Whom Paid				M	D	Y	Amount
ANN PRINTING AND PROMOTIONS INC				1	0	4	76 <sup>89</sup>
Address		Purpose		Check Number			
269 E. MARKET ST		ELECTION TRI FOLD MAILER		106			
City	State	Zip Code	Check Number				
WARREN	OH	44481	106				
To Whom Paid				M	D	Y	Amount
TR PRESORT MAILING CENTER INC				1	0	13	252 <sup>12</sup>
Address		Purpose		Check Number			
468 High ST.		TRI FOLD BULK MAILING		108			
City	State	Zip Code	Check Number				
WARREN	OH	44481	108				
To Whom Paid				M	D	Y	Amount
OFFICE MAX				1	0	14	15 <sup>24</sup>
Address		Purpose		Check Number			
5555 Youngstown WARREN Rd		STAPLER FOR MAILER		109			
City	State	Zip Code	Check Number				
Niles	OH	44446	109				
To Whom Paid				M	D	Y	Amount
Address		Purpose		Check Number			
City	State	Zip Code	Check Number				
	OH						
To Whom Paid				M	D	Y	Amount
Address		Purpose		Check Number			
City	State	Zip Code	Check Number				
	OH						
To Whom Paid				M	D	Y	Amount
Address		Purpose		Check Number			
City	State	Zip Code	Check Number				
	OH						

868.76  
Page Total \$0.00

Front View

THE PAGE ON THIS DOCUMENT HAS A GREEN BACKGROUND AND MICROPRINTING. DO NOT CASH IF MISSING

The Huntington National Bank  25-2  
44C

16162349  
Date 8-30-2011

Pay to the order of Eideon A. Fetterolf JR. \$ 1,000.00

one thousand and 00/100

ACCOUNT NUMBER  
[REDACTED]

MAYOR Campaign Contribution  [Signature]

0020017X1

16162349 [REDACTED]

Back View

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Associated School EC  
24283181

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE

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Division of Liquor Control  
 Department of Commerce  
 Daily Activity Report

C.O. Gideon Fetterolf (Unit# 278)

Day/Date Tuesday, August 30, 2011

Overtime 0

Compensatory Time 0

Shift Pay Hours 0

Car No 24-307

Start Mileage 98098

End Mileage 98139

Total Mileage 41

Field Assignment	Office	Paid Break	Renewals	Travel	Total
1.42	4.5	0.25	0.5	1.33	8

Start Time	End Time	CASE	Location	Action	Expense Item	Amount
8:00 AM	12:00 PM	Office-0	RESIDENCE/OFFICE- NEWTON FALLS	CHECK & EPLY TO E-MAIL, RETURN CALLS, DAILY REPORT, E-FILE REN #5245900 TASK # 14954, E- FILE RETURNED CERTIFIED MAIL NOTICE TO INST NEW #2485809 PROBLEM WITH SECURE INTERNET SERVER & OLLE		
12:00 PM	12:30 PM	Unpaid-0	NEWTON FALLS	LUNCH		
12:30 PM	1:05 PM	Travel-0	NEWTON FALLS TO AUSTINTOWN TWP			
1:05 PM	1:35 PM	Renewals- 149430	CERTIFIED OIL CORP - 825 N CANFIELD NILES RD, AUSTINTOWN 137020000462	RENEWAL INSPECTION, PHOTO, MEETS REQ.		
1:35 PM	3:00 PM	Field Assignment- 149457	WEDGEWOOD NFS INC - 1715 S RACCOON RD, YOUNGSTOWN 9463043	VERIFY ADDRESS, AREA SKETCH, STORE FRONT SERVICE TO INST. PHOTO, INSPECTION OF PREMISES, SKETCH OF PREMISES, ISSUE 6.31 CONFER W/ APPLICANT.		
3:00 PM	3:15 PM	Paid Break-0	AUSTINTOWN	BREAK		
3:15 PM	4:00 PM	Travel-0	AUSTINTOWN TWP TO NEWTON FALLS			
4:00 PM	4:30 PM	Office-0	RESIDENCE/OFFICE- NEWTON FALLS	CHECK E-MAIL, PRINT ASSIGNMENT, RETURN CALL		
Total Expenses						\$0.00

Compliance Officer Signature

Date

Approved by: (Signature)

Date

DOLC



Division of Liquor Control  
 Department of Commerce  
 Daily Activity Report

C.O. Gideon Fetterolf (Unit# 278)

Day/Date Thursday, September 01, 2011

Overtime 0

Compenstory Time 0

Shift Pay Hours 0

Car No 24-307

Start Mileage 98208

End Mileage 98278

Total Mileage 70

Field Assignment	Miscellaneous	Office	Paid Break	Renewals	Travel	Vehicle Maintenance	Total
1.83	0.17	2.33	0.25	0.67	2.58	0.17	8

Start Time	End Time	CASE	Location	Action	Expense Item	Amount
8:00 AM	10:00 AM	Office-0	RESIDENCE/OFFICE-NEWTON FALLS	CHECK & REPLY TO E-MAIL PROBLEM WITH SECORE SERVER, AUGUST S/C REPORT, DAILY REPORT, E-FILE RENEWAL #1370200-00462 TASK # 149430, REN # 1173382 TASK # 149432, PRINT ASSIGNMENTS, RETURN CALLS, CONTACT APPLICANT		
10:00 AM	10:10 AM	Miscellaneous-0	POST OFFICE-NEWTON FALLS	MAIL S/C REPORT TO CENTRAL OFFICE		
10:10 AM	10:20 AM	Travel-0	NEWTON FALLS TO LORDSTOWN			
10:20 AM	10:30 AM	Vehicle Maintenance-0	BP LORDSTOWN	SERVICE S/C:::12.817 GAL OD 98215		\$46.00
10:30 AM	10:45 AM	Renewals-149736	6565 TOD AVENUE INC - 6565 TOD AV SW, LORDSTOWN 8200135	RENEWAL INSPECTION, PHOTO, MEETS REQ.		
10:45 AM	11:10 AM	Renewals-149737	EARL ROSS - 8421 TOD AV SW & PATIO, LORDSTOWN 75336680005	RENEWAL INSPECTION, MEETS REQ., PHOTO,		
11:10 AM	11:30 AM	Travel-0	LORDSTOWN TO AUSTINTOWN			
11:30 AM	12:00 PM	Unpaid-0	AUSTINTOWN	LUNCH		
12:00 PM	12:30 PM	Travel-0	AUSTINTOWN TO BOARDMAN TWP			
12:30 PM	1:15 PM	Field Assignment-149647	WR SAM INC - 850 E WESTERN RESERVE RD, BOARDMAN 93299670005	FINAL INSPECTION, INSPECTION OF PREMISES, SKETCH OF PREMISES, CONFER W/ APPLICANT, PHOTO ISSUE 6.31		
1:15 PM	1:35 PM	Travel-0	BOARDMAN TWP TO BEAVER TWP			



Division of Liquor Control  
 Department of Commerce  
 Daily Activity Report

1:35 PM	2:40 PM	Field Assignment-149521	MORRISONS BEAVER PARTY SHOP - 9789 MARKET ST BLDG A, NORTH LIMA 6180903	VERIFY ADDRESS, PHOTO, AREA SKETCH, INSPECTION OF PREMISES, SKETCH OF PREMISES, CONFER W/ APPLICANT, ISSUE 6.31		
2:40 PM	3:10 PM	Travel-0	BEAVER TWP TO AUSTINTOWN			
3:10 PM	3:25 PM	Paid Break-0	AUSTINTOWN TWP	BREAK		
3:25 PM	4:10 PM	Travel-0	AUSTINTOWN TO NEWTON FALLS			
4:10 PM	4:30 PM	Office-0	RESIDENCE/OFFICE-NEWTON FALLS	RETURN CALL CHECK SERVER STILL UNABLE TO CONNECT		
Total Expenses						\$46.00

Compliance Officer Signature

Date

Approved by: (Signature)

Date

DOLC

30-A  
R.C. 3517.10

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

*Amended*

Full Name of Committee <b>Gideon A. FETTEROLF JR.</b>						Registration Number, if PAC	
Full Name of Candidate <b>Gideon A. FETTEROLF JR.</b>							
Street Address <b>321 Ridge Rd</b>				Office Sought <b>MAYOR</b>		District <b>Newton Falls Village</b>	
City <b>Newton Falls</b>				State <b>OH</b>	Zip Code <b>44444</b>		
Type of Report (Place X to the left of report)	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Report Electronically Filed? <input type="checkbox"/> Yes <input type="checkbox"/> No		M		D		Y
				<b>11 0 8</b>		<b>20 11</b>	

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. Amounts brought forward from previous reports	\$	<b>0</b>
2. Total monetary contributions (From Form No. 31-A)	\$	<b>2148.43</b>
3. Total other income (From Form No. 31-A-2)	\$	<b>0</b>
4. Total funds available (sum of lines 1, 2, 3)	\$	<b>2148.43</b>
5. Total monetary expenditures (From Form No. 31-B)	\$	<del>2032.75</del>
6. Balance on hand (line 4 minus line 5)	\$	<del>115.68</del>
7. Value of in-kind contributions received (From Form No. 31-A-3)	\$	
8. Value of in-kind contributions made (From Form No. 31-B-3)	\$	
9. Outstanding debts owed by committee (From Form No. 31-C)	\$	
10. Outstanding debts to committee (From Form No. 31-D)	\$	
11. Outstanding loans owed by committee (From Form No. 31-E)	\$	
12. Value of independent expenditures made (From Form No. 31-F)	\$	
13. Total amount of funds available (line 4 plus line 7 minus line 8 plus line 9 minus line 10 plus line 11 minus line 12)	\$	

**1162.78**  
**985.65**  
MAY 21 AM 11:51

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

**Gideon A. FETTEROLF JR.**  
Print Name and Title (Treasurer and Deputy Treasurer only)

*Gideon A. Fetterolf*  
Signature

**10-21-11 12/16/11**  
00/00/0000  
Date

Contribution pages **1**

Expenditure pages **2**

Other pages **0**

Total pages **3**

31-A  
R.C. 3517.10

less \$100.00  
cash

Page 1

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Gideon A. FETTEROLF JR</b>						
Full Name of Contributor <b>Gideon A. FETTEROLF JR</b>				Registration Number, if PAC		
Street Address <b>321 Ridge Rd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>	
City <b>Newton Falls,</b>	State <b>OH</b>	Zip Code <b>44444</b>	M <b>07</b>	D <b>20</b>	Y <b>11</b>	Amount <b>45<sup>00</sup></b>
Full Name of Contributor <b>Gideon A. FETTEROLF JR</b>				Registration Number, if PAC		
Street Address <b>321 Ridge Rd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>	
City <b>Newton Falls</b>	State <b>OH</b>	Zip Code <b>44444</b>	M <b>07</b>	D <b>29</b>	Y <b>11</b>	Amount <b>50<sup>00</sup></b>
Full Name of Contributor <b>Gideon A. FETTEROLF JR</b>				Registration Number, if PAC		
Street Address <b>321 Ridge Rd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>	
City <b>Newton Falls</b>	State <b>OH</b>	Zip Code <b>44444</b>	M <b>07</b>	D <b>29</b>	Y <b>11</b>	Amount <b>5<sup>00</sup></b>
Full Name of Contributor <b>Gideon A. FETTEROLF JR</b>				Registration Number, if PAC		
Street Address <b>321 Ridge Rd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>	
City <b>Newton Falls</b>	State <b>OH</b>	Zip Code <b>44444</b>	M <b>08</b>	D <b>01</b>	Y <b>11</b>	Amount <b>38.43</b>
Full Name of Contributor <b>YASIR ALGADI</b>				Registration Number, if PAC		
Street Address <b>6565 Tod AU, SW</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>	
City <b>Lordsburg</b>	State <b>OH</b>	Zip Code <b>44481</b>	M <b>09</b>	D <b>02</b>	Y <b>11</b>	Amount <b>500<sup>00</sup></b>
Full Name of Contributor <b>NEAL G ATWAY &amp; SARA R. ATWAY</b>				Registration Number, if PAC		
Street Address <b>5900 CHERRY WAY</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>BOARDMAN</b>	State <b>OH</b>	Zip Code <b>44572</b>	M <b>08</b>	D <b>06</b>	Y <b>11</b>	Amount <b>500<sup>00</sup></b>
Full Name of Contributor <b>AMAR SHAFI</b>				Registration Number, if PAC		
Street Address <b>318 MILTON BLVD</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>Newton Falls</b>	State <b>OH</b>	Zip Code <b>44444</b>	M <b>08</b>	D <b>30</b>	Y <b>11</b>	Amount <b>1,000</b>
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
	OH					

\* 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)]

2148.43  
Page Total \$0.00

31-B  
R.C. 3517.10

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 1

check  
85.00  
Receipt

Name of Committee in Full				M	D	Y	Amount
Gideon A. Fetterolf, JR				07	29	11	50 <sup>00</sup>
To Whom Paid		Associated School Employees Credit Union					
Address		22 S. CANAL ST		Purpose		OPEN CHECKING ACCOUNT FOR COMMITTEE	
City		NEWTON FALLS, OH		State		OH	
		Zip Code		44444		Check Number	
						CASH	
To Whom Paid		Associated School Employees Credit Union		9	2	11	5 <sup>00</sup>
Address		22 S. CANAL ST		Purpose		SAVINGS ACC REQUIRED FOR CHECKING ACCOUNT	
City		NEWTON FALLS, OH		State		OH	
		Zip Code		44444		Check Number	
						CASH	
To Whom Paid		Trumbull County Board of Election		07	20	11	45 <sup>00</sup>
Address		YOUNGSTOWN RD		Purpose		FILING FEE WRITE IN STATEMENT FOR MAYOR	
City		WARREN		State		OH	
		Zip Code		44481		Check Number	
						CASH	
To Whom Paid		STAR SUPPLY BARGAIN OUTLET					38 <sup>KS</sup>
Address		875 MAHONEY AV		Purpose		PAPER FOR SIGNS	
City		YOUNGSTOWN		State		OH	
		Zip Code		44502		Check Number	
						CASH	
To Whom Paid		Home Depot		9	1	11	81 <sup>63</sup>
Address		6100 MAHONEY AV.		Purpose		LUMBER & MISC. FOR SIGNS	
City		AUSTINTOWN		State		OH	
		Zip Code		44515		Check Number	
						101	
To Whom Paid		Trumbull County Board of Election		9	1	11	7 <sup>65</sup>
Address		YOUNGSTOWN RD		Purpose		ADDRESS LABELS	
City		WARREN		State		OH	
		Zip Code		44481		Check Number	
						102	
To Whom Paid		PAT CATAN'S CRAFT CENTER		9	1	11	30 <sup>00</sup>
Address		1923 RIDGE RD		Purpose		STENCILS & INK FOR SIGNS	
City		WARREN		State		OH	
		Zip Code		44482		Check Number	
						103	
To Whom Paid		FAIR PRICE ACE HDW		9	2	11	36 <sup>20</sup>
Address		165 E BROAD ST		Purpose		PAINT FOR SIGN	
City		NEWTON FALLS		State		OH	
		Zip Code		44444		Check Number	
						104	

294.02  
Page Total \$0.00

31-B  
R.C. 3517.10

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 2

*check  
8500  
Receipt*

*CKA7 void*

Name of Committee in Full		M	D	Y	Amount
Gideon A. Fetterolf, JR					
To Whom Paid	ANN PRINTING AND PROMOTIONS INC	0	9	23	11
Address	269 E. MARKET ST	Purpose		105	524 <sup>51</sup>
City	WARREN	State	Zip Code		
		OH	44481		
To Whom Paid	ANN PRINTING AND PROMOTIONS INC	1	0	04	11
Address	269 E. MARKET ST	Purpose		106	76 <sup>89</sup>
City	WARREN	State	Zip Code		
		OH	44481		
To Whom Paid	TR PRESOAT MAILING CENTER INC	1	0	13	11
Address	468 High St.	Purpose		108	252 <sup>12</sup>
City	WARREN	State	Zip Code		
		OH	44481		
To Whom Paid	OFFICE MAX	1	0	14	11
Address	5355 Youngstown WARREN Rd	Purpose		109	15 <sup>24</sup>
City	Niles	State	Zip Code		
		OH	44446		
To Whom Paid					
Address		Purpose			
City		State	Zip Code		
		OH			
To Whom Paid					
Address		Purpose			
City		State	Zip Code		
		OH			
To Whom Paid					
Address		Purpose			
City		State	Zip Code		
		OH			

868.76  
Page Total \$0.00

30-A  
R.C. 3517.10

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <i>Gideon A. Fetterolf Jr.</i>						Registration Number, if PAC	
Full Name of Candidate <i>Gideon A. Fetterolf Jr.</i>							
Street Address <i>321 Ridge Rd</i>				Office Sought <i>MAYOR</i>		District <i>11th</i>	
City <i>Newton Falls</i>				State <i>OH</i>		Zip Code <i>44444</i>	
Type of Report (place X to the left of report type)	<input type="checkbox"/> Pre-Primary	<input type="checkbox"/> Post-Primary	<input type="checkbox"/> Pro-General	<input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date of Election			

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	\$	<i>975.65</i>
2. Total monetary contributions (From Form No. 31-A)	\$	<i>145.59</i>
3. Total other income (From Form No. 31-A-2)	\$	
4. Total funds available (sum of lines 1, 2, 3)	\$	<i>1121.50</i>
5. Total monetary expenditures (From Form No. 31-B)	\$	<i>349.78</i>
6. Balance on hand (line 4 minus line 5)	\$	<i>771.46</i>
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	
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.	\$	

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.

*Gideon A. Fetterolf Jr.*      *[Signature]*      *1/3/12*  
Print Name and Title (Treasurer and Deputy Treasurer only)      Signature      Date

Contribution pages	Expenditure pages	Other pages	Total pages <i>03</i>
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30-A  
R.C. 3517.10

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <i>Gideon A. Fetterolf Jr.</i>				Registration Number, if PAC			
Full Name of Candidate <i>Gideon A. Fetterolf Jr.</i>							
Street Address <i>321 Ridge Rd</i>				Office Sought <i>MAYOR</i>		District <i>Village of</i> <i>Newton Falls</i>	
City <i>Newton Falls</i>				State <i>OH</i>		Zip Code <i>44444</i>	
Type of Report (place X to the left of report type)	Pre-Primary	Post-Primary	Pre-General	<input checked="" type="checkbox"/> Post-General	Annual Year		
	July Monthly	August Monthly	September Monthly	Termination	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 <i>1</i> D <i>10</i> Y <i>11</i>	

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	\$	<i>985</i>	<i>65</i>
2. Total monetary contributions (From Form No. 31-A)	\$	<i>645</i>	<i>59</i>
3. Total other income (From Form No. 31-A-2)	\$		
4. Total funds available (sum of lines 1, 2, 3)	\$	<i>1631</i>	<i>24</i>
5. Total monetary expenditures (From Form No. 31-B)	\$	<i>849</i>	<i>78</i>
6. Balance on hand (line 4 minus line 5)	\$	<i>781</i>	<i>46</i>
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$		
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.	\$		

TRILLIUM CAPITAL  
 BOARD OF ELECTIONS  
 2011 DEC 16 PM 12:20

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.

*Gideon A. Fetterolf Jr.*  
Print Name and Title (Treasurer and Deputy Treasurer only)

*Gideon A. Fetterolf Jr.*  
Signature

*12/10/11*  
Date

Contribution pages \_\_\_\_\_

Expenditure pages \_\_\_\_\_

Other pages \_\_\_\_\_

Total pages 3

31-A  
R.C. 3517.10

less \$100.  
cash

Statement of Contributions Received

Page 1

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>GIDEON A. FETTEROLF JR.</b>		Registration Number, if PAC	
Full Name of Contributor <b>RETURN of Tool RENTAL DEPOSIT -</b>		Registration Number, if PAC	
Street Address <b>165 E BROAD ST</b>	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.) <b>CASH</b>	
City <b>NEWTON FALLS, OH</b>	State <b>OH</b>	Zip Code <b>44444</b>	Amount <b>102511 50<sup>00</sup></b>
Full Name of Contributor <b>GIDEON A. FETTEROLF JR. CANDIDATE</b>		Registration Number, if PAC	
Street Address <b>321 Ridge Rd</b>	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.) <b>CASH</b>	
City <b>NEWTON FALLS</b>	State <b>OH</b>	Zip Code <b>44444</b>	Amount <b>110111 95<sup>59</sup></b>
Full Name of Contributor <b>YASSER Z. ALSADI</b>		Registration Number, if PAC	
Street Address <b>1150 SALT SPRING RD</b>	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.) <b>CK #1050</b>	
City <b>WARREN</b>	State <b>OH</b>	Zip Code <b>44481</b>	Amount <b>121911 500<sup>-</sup></b>
Full Name of Contributor		Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
City	State	Zip Code	Amount
Full Name of Contributor		Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
City	State	Zip Code	Amount
Full Name of Contributor		Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
City	State	Zip Code	Amount
Full Name of Contributor		Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
City	State	Zip Code	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)]

Page Total **645.59**  
**\$0.00**

31-B  
R.C. 3517.10

*check  
85.00  
REF.*

Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 1

Name of Committee in Full							
Gideon A. Fetterolf, Jr							
To Whom Paid				M	D	Y	Amount
FAIR PRICE ACE HARDWARE				1	0	25	11 87.25
Address		Purpose					
165 E BROAD ST.		Post Hole digger Rental w/ Deposit					
City		State	Zip Code	Check Number			
NEWTON FALLS		OH	44444	110			
To Whom Paid				M	D	Y	Amount
STAR Supply				1	0	25	11 29.53
Address		Purpose					
875 MAHONING AV		PLASTIC SHEETS FOR POLL SIGNS					
City		State	Zip Code	Check Number			
Youngstown		OH	44502	111			
To Whom Paid				M	D	Y	Amount
Roby Lee RESTAURANT				1	1	17	11 125.00
Address		Purpose					
		Post Election Food FOR CAMPAIGN WORKERS					
City		State	Zip Code	Check Number			
NEWTON FALLS		OH	44444	112			
To Whom Paid				M	D	Y	Amount
NEWTON FALLS CONVENIENT MART				1	1	08	11 50.00
Address		Purpose					
321 MILTON BLD		HOT PIZZA FOR POLL WORKERS					
City		State	Zip Code	Check Number			
NEWTON FALLS		OH	44444	CASH			
To Whom Paid				M	D	Y	Amount
DONUT HOUSE				1	1	08	11 17.98
Address		Purpose					
323 MILTON BLD.		DONUTS FOR POLL WORKERS					
City		State	Zip Code	Check Number			
NEWTON FALLS		OH	44444	CASH			
To Whom Paid				M	D	Y	Amount
MCDONALD'S RESTAURANT				1	1	08	11 18.00
Address		Purpose					
		Coffee FOR POLL WORKERS					
City		State	Zip Code	Check Number			
NEWTON FALLS		OH	44444	CASH			
To Whom Paid				M	D	Y	Amount
MCDONALD'S RESTAURANT				1	1	08	11 22.00
Address		Purpose					
		Coffee & Hot Chocolate FOR POLL WORKERS					
City		State	Zip Code	Check Number			
NEWTON FALLS		OH	44444	CASH			
To Whom Paid				M	D	Y	Amount
YASSER Z. ALSADI				1	2	14	11 500.00
Address		Purpose					
1150 SALT SPRING RD		REWARD OF CASH DONATION					
City		State	Zip Code	Check Number			
WARREN		OH	44481	113			

849.79  
Page Total \$0.00

DATE 12/14/11 No. 73049  
 RECEIVED FROM Treasurer - Gideon A Fetterolf \$ 500<sup>00</sup>  
Five Hundred and 00/100 Check # 113 DOLLARS  
 FOR RENT  
 FOR Return of CASH Contributions  
 ACCOUNT FROM TO  
 PAYMENT  CASH  CHECK  
 BAL. DUE  MONEY ORDER BY Gideon A Fetterolf 1182

DATE 12/14/11 No. 73049  
 RECEIVED FROM YASIR AL-SAL \$ 500<sup>00</sup>  
Five Hundred and 00/100 DOLLARS  
 FOR RENT  
 FOR Contribution To Treasurer  
 ACCOUNT FROM TO  
 PAYMENT  CASH  CHECK Check # 1150  
 BAL. DUE  MONEY ORDER BY Gideon A Fetterolf 1182



(330) 792-4000  
 www.asecu.com

Date 12/15/2011 Time 11:19:33  
 Branch 5 EmployeeID 81  
 Device 475 Checks \$500.00  
 Trans Number 0010 Member Number XXXX18454  
 Member Name GIDEON A FETTEROLF JR  
 Eff. Date 12/15/2011

Deposit/Payment for: \$500.00  
 To Account \$ 9  
 Old Balance \$778.97 New Balance \$1,278.97