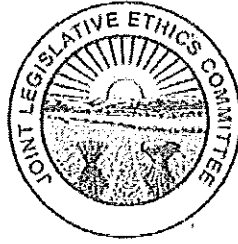


\$40 FILING FEE

JOINT LEGISLATIVE ETHICS COMMITTEE
100 EAST BROAD STREET, SUITE 1910
COLUMBUS, OH 43215



THIS STATEMENT IS TO BE
FILED IN 2020 FOR THE
CALENDAR YEAR 2019

2019 Financial Disclosure Statement

(DO NOT SUBMIT PRIOR TO JANUARY 1, 2020)

Please provide a complete address and telephone number

PLEASE PRINT OR TYPE (Do not use pencil)



House



Senate



Agency

1. NAME OF PERSON FILING STATEMENT

Huffman
LAST

Stephen
FIRST

A
M.I.

2. MAILING ADDRESS (May use Home, Business or Government)

1 Capital Square
STREET

Columbus
CITY

43215
ZIP CODE

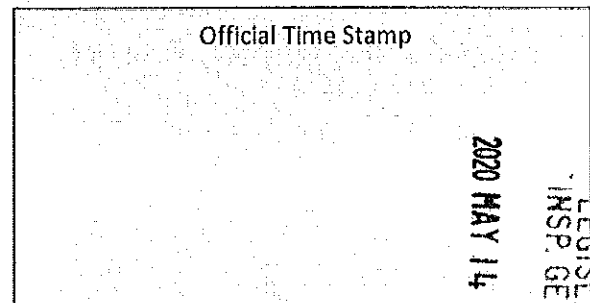
Franklin
COUNTY

614-466-6247
TELEPHONE NUMBER

3. EMAIL ADDRESS (OPTIONAL)

4. CURRENT EMPLOYER(S) (Other than the General Assembly)

1 Team Health



2020 MAY 14 AM 11:44

OFFICE OF
LEGISLATIVE
INSPECTION
GENERAL

Filer:

YOU MUST COMPLETE THIS FORM IF:

- * You are a member of the General Assembly during 2020.
- * You were a member of the General Assembly during 2019.
- * You are currently, or were in 2019, an employee of the General Assembly or any legislative agency who is designated by the Joint Legislative Ethics Committee or employing agency, as a financial disclosure statement filer.
- * You are a candidate for the General Assembly whose name will appear on a ballot during 2020.

FILING FEE: \$40 FILING FEE. Campaign funds MAY be used for this fee. If you are or were an employee (non-elected) of the General Assembly or any legislative agency, the \$40 fee will be invoiced to your agency at a later date.

PENALTIES: Any person who knowingly files a false statement may be subject to criminal prosecution of a first degree misdemeanor. Any person who fails to file a complete financial disclosure statement by the appropriate deadline may be assessed a late filing fee of \$10.00 for each day the statement is late, up to a maximum of \$250.00, and may also be subject to criminal prosecution of a fourth degree misdemeanor.

FILING DEADLINE: The filing deadline is **Friday, May 15, 2020**, unless one of the following applies:

- * **CANDIDATES APPEARING ON A PRIMARY ELECTION BALLOT:** Must file not later than the thirtieth day before the earliest election at which his or her candidacy is to be voted on. The filing deadline for candidates whose name will appear on the March 17, 2020 Primary Election ballot is February 18, 2020.
- * **WRITE-IN CANDIDATES:** Must file not later than the twentieth day before the earliest election at which his or her candidacy is to be voted on.
- * **AN APPOINTEE TO THE GENERAL ASSEMBLY:** Any person appointed to fill a vacancy for an un-expired term in the General Assembly must file within 15 days after he or she qualifies for office, unless the deadline is extended by the Joint Legislative Ethics Committee for good cause.
- * **A NEWLY HIRED OR PROMOTED EMPLOYEE:** An employee of the General Assembly, or any legislative agency, must file by May 15, 2020, or within 90 days after employment or promotion.

ATTACHMENTS: You may attach additional pages as necessary; however, please reference the appropriate section for which you are submitting additional information.

This financial disclosure statement is a public record upon filing and is made available for public review on www.ohiofds.com.

~~FOR MORE INFORMATION, PLEASE CONTACT THE JOINT LEGISLATIVE ETHICS COMMITTEE, OFFICE OF THE LEGISLATIVE INSPECTOR GENERAL AT (614)728-5100.~~

This is a personal financial disclosure statement for calendar year 2019. The following Sections 1-12 must be completed using calendar year 2019 personal and financial information.

THIS IS NOT A CAMPAIGN FINANCE-RELATED REPORT.

1. INCOME

Complete **EITHER** Section A (Member) or Section B (Non-Incumbent Candidate or Employee), whichever is applicable.

A. IF YOU ARE A MEMBER OF THE GENERAL ASSEMBLY IN 2020 OR WERE A MEMBER OF THE GENERAL ASSEMBLY IN 2019: You are required to list **EVERY** source of income and identify the amount from that source in accordance with the following ranges and appropriate identifying letter: A. \$0 - \$999; B. \$1,000 - \$9,999; C. \$10,000 - \$24,999; D. \$25,000 - \$49,999; E. \$50,000 - \$99,999; F. \$100,000 or more. "Income" includes sources of gross income for federal tax purposes and interest and dividends on all governmental securities. Also, list each source of income received by any other person for your use or benefit. You are not required to list the source of income of your spouse, unless the income was received specifically for your use or benefit. MILEAGE REIMBURSEMENT IS REPORTED IN "SECTION 8. TRAVEL". DO NOT INCLUDE MILEAGE REIMBURSEMENT IN "SECTION 1. INCOME".

You are not required to list the individual items of income from your business or profession, only the name of any business, governmental agency, or employer from which you received income; EXCEPT (1) you must list the source and dollar amount of income received, or shared with a partner in your business or profession, that is attributable to services or goods provided to a client or customer who is a "legislative agent" AND/OR (2) you must list the source and dollar amount of income received from a person or entity that is doing or seeking to do business with the General Assembly.

Attorneys, physicians, or other professionals subject to confidentiality requirements as described in Revised Code Section 102.02(A)(2)(b) should list each practice separately but need not disclose the names of their clients, patients, or other recipients of professional services unless those clients, patients, or other recipients are legislative agents. If the client, patient, or other recipient is a legislative agent, you must disclose each client, patient, or other recipient unless excepted under Revised Code Section 102.02(A)(2)(b).

For each source of income listed, briefly describe the services for which the income was received.

EXAMPLE:

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
State of Ohio	Senator/Representative	E
Smith and Jones Law Firm	Lawyer	C
Friendly National Bank	Interest on Savings Account	A
Leo Lobbyist - Legislative Agent	Boat Insurance Policy	\$143.00
123 Main Street	Rental Income	B

IF NONE, CHECK HERE ☐

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
1 Physician Review Network	medical	A
2 Emergency Medicine Specialist	medical	E
3 Shipman, Dixon + Livingston	consultant	B
4 Lopez, Severitt + Pratt	consultant	B
5 Lwenter	medical	F
6 1-888-OhioComp	medical	D
7 Mobile Medical Examinations	medical	B
8 Medical Administration	medical	B
9 Dr. Madhan	medical	B
10 Community Care Health	medical	C
11 The Ayers Group	medical	B
12 State of Ohio BWC	medical	B

1. INCOME

Complete **EITHER** Section A (Member) or Section B (Non-Incumbent Candidate or Employee), whichever is applicable.

A. IF YOU ARE A MEMBER OF THE GENERAL ASSEMBLY IN 2020 OR WERE A MEMBER OF THE GENERAL ASSEMBLY IN 2019: You are required to list **EVERY** source of income and identify the amount from that source in accordance with the following ranges and appropriate identifying letter: A. \$0 - \$999; B. \$1,000 - \$9,999; C. \$10,000 - \$24,999; D. \$25,000 - \$49,999; E. \$50,000 - \$99,999; F. \$100,000 or more. "Income" includes sources of gross income for federal tax purposes and interest and dividends on all governmental securities. Also, list each source of income received by any other person for your use or benefit. You are not required to list the source of income of your spouse, unless the income was received specifically for your use or benefit. MILEAGE REIMBURSEMENT IS REPORTED IN "SECTION 8. TRAVEL". DO NOT INCLUDE MILEAGE REIMBURSEMENT IN "SECTION 1. INCOME".

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For each source of income listed, briefly describe the services for which the income was received.

EXAMPLE:

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
State of Ohio	Senator/Representative	E
Smith and Jones Law Firm	Lawyer	C
Friendly National Bank	Interest on Savings Account	A
Leo Lobbyist - Legislative Agent	Boat Insurance Policy	\$143.00
123 Main Street	Rental Income	B

IF NONE, CHECK HERE ☐

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
1 clnovalon	medical	B
2 3HAB	medical	C
3 Sheabley	medical	C
4 Cult Comp MCO	medical	B
5 Ohio Medical Transport	medical	B
6 All Med	medical	B
7 XL Home	medical	C
8 Comp management	medical	C
9 Careworks	medical	B
10 Keystone PRO	medical	F
11 Mitchell International	medical	C
12 AmeriTeam Team Health	medical	F

1. INCOME

Complete EITHER Section A (Member) or Section B (Non-Incumbent Candidate or Employee), whichever is applicable.

A. IF YOU ARE A MEMBER OF THE GENERAL ASSEMBLY IN 2020 OR WERE A MEMBER OF THE GENERAL ASSEMBLY IN 2019: You are required to list EVERY source of income and identify the amount from that source in accordance with the following ranges and appropriate identifying letter: A. \$0 - \$999; B. \$1,000 - \$9,999; C. \$10,000 - \$24,999; D. \$25,000 - \$49,999; E. \$50,000 - \$99,999; F. \$100,000 or more. "Income" includes sources of gross income for federal tax purposes and interest and dividends on all governmental securities. Also, list each source of income received by any other person for your use or benefit. You are not required to list the source of income of your spouse, unless the income was received specifically for your use or benefit. MILEAGE REIMBURSEMENT IS REPORTED IN "SECTION 8. TRAVEL". DO NOT INCLUDE MILEAGE REIMBURSEMENT IN "SECTION 1. INCOME".

You are not required to list the individual items of income from your business or profession, only the name of any business, governmental agency, or employer from which you received income; EXCEPT (1) you must list the source and dollar amount of income received, or shared with a partner in your business or profession, that is attributable to services or goods provided to a client or customer who is a "legislative agent" AND/OR (2) you must list the source and dollar amount of income received from a person or entity that is doing or seeking to do business with the General Assembly.

Attorneys, physicians, or other professionals subject to confidentiality requirements as described in Revised Code Section 102.02(A)(2)(b) should list each practice separately but need not disclose the names of their clients, patients, or other recipients of professional services unless those clients, patients, or other recipients are legislative agents. If the client, patient, or other recipient is a legislative agent, you must disclose each client, patient, or other recipient unless excepted under Revised Code Section 102.02(A)(2)(b).

For each source of income listed, briefly describe the services for which the income was received.

EXAMPLE:

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
State of Ohio	Senator/Representative	E
Smith and Jones Law Firm	Lawyer	C
Friendly National Bank	Interest on Savings Account	A
Leo Lobbyist - Legislative Agent	Boat Insurance Policy	\$143.00
123 Main Street	Rental Income	B

IF NONE, CHECK HERE ☐

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
1 Harper Holdings	medical	C
2 State of Ohio	senator	E
3 Huffman Cottage Rental	rental property	C
4 5th/3rd Bank	interest / investment	A
5 Charles Schwab	interest investment	E
6 Genesis Gas Royalties	gas royalties	C
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1. INCOME

Complete **EITHER** Section A (Member) or Section B (Non-Incumbent Candidate or Employee), whichever is applicable.

A. IF YOU ARE A MEMBER OF THE GENERAL ASSEMBLY IN 2020 OR WERE A MEMBER OF THE GENERAL ASSEMBLY IN 2019: You are required to list **EVERY** source of income and identify the amount from that source in accordance with the following ranges and appropriate identifying letter: A. \$0 - \$999; B. \$1,000 - \$9,999; C. \$10,000 - \$24,999; D. \$25,000 - \$49,999; E. \$50,000 - \$99,999; F. \$100,000 or more. "Income" includes sources of gross income for federal tax purposes and interest and dividends on all governmental securities. Also, list each source of income received by any other person for your use or benefit. You are not required to list the source of income of your spouse, unless the income was received specifically for your use or benefit. MILEAGE REIMBURSEMENT IS REPORTED IN "SECTION 8. TRAVEL". DO NOT INCLUDE MILEAGE REIMBURSEMENT IN "SECTION 1. INCOME".

You are not required to list the individual items of income from your business or profession, only the name of any business, governmental agency, or employer from which you received income; EXCEPT (1) you must list the source and dollar amount of income received, or shared with a partner in your business or profession, that is attributable to services or goods provided to a client or customer who is a "legislative agent" AND/OR (2) you must list the source and dollar amount of income received from a person or entity that is doing or seeking to do business with the General Assembly.

Attorneys, physicians, or other professionals subject to confidentiality requirements as described in Revised Code Section 102.02(A)(2)(b) should list each practice separately but need not disclose the names of their clients, patients, or other recipients of professional services unless those clients, patients, or other recipients are legislative agents. If the client, patient, or other recipient is a legislative agent, you must disclose each client, patient, or other recipient unless excepted under Revised Code Section 102.02(A)(2)(b).

For each source of income listed, briefly describe the services for which the income was received.

EXAMPLE:

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
State of Ohio	Senator/Representative	E
Smith and Jones Law Firm	Lawyer	C
Friendly National Bank	Interest on Savings Account	A
Leo Lobbyist - Legislative Agent	Boat Insurance Policy	\$143.00
123 Main Street	Rental Income	B

IF NONE, CHECK HERE ☐

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
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B. IF YOU ARE A NON-INCUMBENT CANDIDATE OR EMPLOYEE OF THE GENERAL ASSEMBLY OR ANY LEGISLATIVE AGENCY:

You are required to list each source of gross income. You are not required to disclose any dollar amounts except as indicated below. Also, list each source of income received by any other person for your use or benefit. Remember to list your employment as a source of income. "Income" includes gross income for federal tax purposes and interest and dividends on all governmental securities. You are not required to list the sources of income of your spouse, unless the income was received specifically for your use or benefit.

You are not required to list the individual items of income from your business or profession, only the name of any business, governmental agency, or employer from which you received income; EXCEPT (1) you must list the source and dollar amount of income received, or shared with a partner in your business or profession, that is attributable to services or goods provided to a client or customer who is a "legislative agent" AND/OR (2) you must list the source and dollar amount of income received from a person or entity that is doing or seeking to do business with the General Assembly.

Attorneys, physicians, and other professionals subject to confidentiality requirements as described in Revised Code Section 102.02(A)(2)(b) should list each practice separately but need not disclose names of their clients, patients, or other recipients of professional services, unless those clients, patients, or other recipients are legislative agents. If the client, patient, or other recipient is a legislative agent, you must disclose each client, patient, or other recipient, unless excepted under Revised Code Section 102.02(A)(2)(b).

For each source of income listed, briefly describe the services for which the income was received.

IF NONE, CHECK HERE ☐

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (if required)
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1. INCOME

Complete **EITHER** Section A (Member) or Section B (Non-Incumbent Candidate or Employee), whichever is applicable.

A. IF YOU ARE A MEMBER OF THE GENERAL ASSEMBLY IN 2020 OR WERE A MEMBER OF THE GENERAL ASSEMBLY IN 2019: You are required to list **EVERY** source of income and identify the amount from that source in accordance with the following ranges and appropriate identifying letter: A. \$0 - \$999; B. \$1,000 - \$9,999; C. \$10,000 - \$24,999; D. \$25,000 - \$49,999; E. \$50,000 - \$99,999; F. \$100,000 or more. **"Income" includes sources of gross income for federal tax purposes and interest and dividends on all governmental securities.** Also, list each source of income received by any other person for your use or benefit. You are not required to list the source of income of your spouse, unless the income was received specifically for your use or benefit. **MILEAGE REIMBURSEMENT IS REPORTED IN "SECTION 8. TRAVEL". DO NOT INCLUDE MILEAGE REIMBURSEMENT IN "SECTION 1. INCOME".**

You are not required to list the individual items of income from your business or profession, only the name of any business, governmental agency, or employer from which you received income; **EXCEPT** (1) you must list the source and dollar amount of income received, or shared with a partner in your business or profession, that is attributable to services or goods provided to a client or customer who is a "legislative agent" **AND/OR** (2) you must list the source and dollar amount of income received from a person or entity that is doing or seeking to do business with the General Assembly.

Attorneys, physicians, or other professionals subject to confidentiality requirements as described in Revised Code Section 102.02(A)(2)(b) should list each practice separately but need not disclose the names of their clients, patients, or other recipients of professional services unless those clients, patients, or other recipients are legislative agents. If the client, patient, or other recipient is a legislative agent, you must disclose each client, patient, or other recipient unless excepted under Revised Code Section 102.02(A)(2)(b).

For each source of income listed, briefly describe the services for which the income was received.

EXAMPLE:

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
State of Ohio	Senator/Representative	E
Smith and Jones Law Firm	Lawyer	C
Friendly National Bank	Interest on Savings Account	A
Leo Lobbyist - Legislative Agent	Boat Insurance Policy	\$143.00
123 Main Street	Rental Income	B

IF NONE, CHECK HERE ☐

SOURCE OF INCOME	SERVICE PERFORMED	AMOUNT (A, B, C, D, E, OR F)
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2. IMMEDIATE FAMILY MEMBERS

List the names of members of your immediate family. "Immediate family" is defined as your spouse residing in your household and any dependent child.

IF NONE, CHECK HERE ☐

1	Kathryn M. Huffman	2	Elizabeth L. Huffman
3	Ashley K. Huffman	4	Allison C. Huffman
5	William H. Huffman	6	John A. Huffman
7		8	
9		10	

3. BUSINESS NAMES

List all names under which you or members of your immediate family do business.

IF NONE, CHECK HERE ☐

1	Stephen A. Huffman MD	2	Kathryn M. Huffman Esq
3	Huffman Cottage Rental	4	
5		6	
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4A. Fiduciary Relationships

List the names of each corporation incorporated or authorized to do business in Ohio and each trust, business trust, partnership, or association authorized to do or transact business in Ohio in which you hold an office or have a fiduciary relationship (regardless of any monetary investment), including holding office in a not-for-profit corporation. For each listing, give a brief description of the office or relationship.

EXAMPLE:

NAME OF CORPORATION, TRUST, BUSINESS TRUST, PARTNERSHIP, OR ASSOCIATION	NAME OF OFFICE OR FIDUCIARY RELATIONSHIP
Smith and Jones	Partner
XYZ Inc.	President
Neighborhood Civic Association	Volunteer Trustee

IF NONE, CHECK HERE



NAME OF CORPORATION, TRUST, BUSINESS TRUST, PARTNERSHIP, OR ASSOCIATION	NAME OF OFFICE OR FIDUCIARY RELATIONSHIP
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4B. Investments

List the names of each corporation incorporated or authorized to do business in Ohio and each trust, business trust, partnership, or association authorized to do or transact business in Ohio in which you or any other person for your use or benefit had an investment of more than \$1,000 during 2019 (at fair market value as of December 31, 2019, or the date of disposition, whichever is earlier). Include all investments of more than \$1,000 even though they constitute a source of income.

You do not have to disclose accounts with banks, building and loan associations, savings and loan associations, and credit unions if the amount is a deposit or withdrawable share account. You are not required to list investments held solely by your spouse unless the investment is strictly for your use or benefit. For each listing, give a brief description of the investment.

EXAMPLE:

NAME OF CORPORATION, TRUST, BUSINESS TRUST, PARTNERSHIP, OR ASSOCIATION	TYPE OF INVESTMENT
Acme Corporation	Common Stock
Public Employee Retirement System of Ohio (PERS)	Bond
Public Employee Deferred Compensation	Mutual Fund
Brokerage Firm	Money Market Account
ABC Fund	Mutual Fund

IF NONE, CHECK HERE ☐

NAME OF CORPORATION, TRUST, BUSINESS TRUST, PARTNERSHIP, OR ASSOCIATION	TYPE OF INVESTMENT
1 Schwab SEP IRA	retirement fund
2 Schwab Roth IRA	retirement fund
3 Schwab	investment account
4 Genesis Drilling Program VI	partnership
5 Public Employee Retirement System OH	retirement fund
6 Public Employee Deferred Comp	mutual fund
7	
8	
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5. REAL ESTATE

List all leasehold or ownership interests in real property located in Ohio to which you hold legal title or in which you have any beneficial interest. You do not have to list your personal residence or any real property used primarily for personal recreation. List by address, parcel number, or other legal description.

IF NONE, CHECK HERE ☐

	STREET ADDRESS	CITY	COUNTY	ZIP CODE
1	9890 Forest Ave	Lakewood OH	Logen	43331
2	9876 Forest Ave	Lakewood OH	Logen	43331
3	9869 Forest Ave	Lakewood OH	Logen	43331
4				
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6. CREDITORS

List the names of all creditors residing or transacting business in Ohio to whom you owe, or have owed, at any time during the calendar year 2019, more than \$1,000 in your own name or in the name of any other person. You must disclose automobile loans, school loans, credit card accounts, and all other similar accounts if the balance exceeded \$1,000 at any time during the calendar year 2019, even if no balance is currently outstanding. You do not have to disclose the debts on your personal residence or real property used primarily for personal recreation, or short-term debts resulting from the ordinary conduct of a business or profession.

IF NONE, CHECK HERE ☐

1	Capital one credit card	2	Barclay card Mastercard
3		4	
5		6	
7		8	
9		10	
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17		18	

7. DEBTORS

List the names of all debtors residing or transacting business in Ohio who owe, or have owed, you at any time during the calendar year 2019, more than \$1,000 in your own name or in the name of any other person for your use or benefit. If you are an attorney, physician, or any other professional subject to a confidentiality requirement as described in Revised Code Section 102.02(A)(2)(b), you do not have to disclose the names of your clients, patients or other recipients of professional services. You do not have to disclose the names of persons indebted to you if they are short-term debts resulting from the ordinary conduct of your business or profession. Banks, building and loan associations, savings and loan associations, and credit unions need not be listed if the only monies owed to you by them are monies which you deposited with such institutions or which are in a withdrawable share account.

IF NONE, CHECK HERE ☐

1	Steve Huffman for Ohio	2	
3		4	
5		6	
7		8	

8. TRAVEL

List the source and amount of each payment of expenses incurred for official travel. Travel expenses include payments or reimbursements received by you in your own name, or by any other person for your use or benefit, for travel in connection with your official duties. You must disclose every payment or reimbursement of expenses for travel both inside and outside of Ohio. You must disclose travel payments or reimbursements, INCLUDING, but not limited to, MILEAGE REIMBURSEMENTS, made to you, or on your behalf, by the General Assembly. Members and employees of the General Assembly need not disclose official travel in a vehicle owned or leased by a state agency or state institution of higher education.

You do not have to disclose expenses incurred at a meeting or convention of a national or state organization to which any state agency, including, but not limited to, any legislative agency or state institution of higher education as defined in Section 3345.011 of the Revised Code, or any political subdivision in Ohio pays membership dues. Questions regarding membership status should be directed to the organization.

IF NONE, CHECK HERE ☐

	SOURCE	AMOUNT
1	Ohio Senate	2353.52
2	Republican Senate Campaign Committee	210.33
3	Ohio Chamber of Commerce	283.00 2p
4	Ohio House	455.52 2p
5		
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9. GIFTS

List the source of each gift worth more than \$75, aggregated for the calendar year 2019, received by you in your own name, or by any other person for your use or benefit. If you are a member or employee of the General Assembly, also list the source of each gift or gifts over \$25, aggregated for the calendar year 2019, received from a legislative agent. If you are a member or employee of the General Assembly, you are prohibited from receiving a gift or gifts from a legislative agent where the value of the gift or gifts aggregated per calendar year, exceeds \$75.

You do not have to disclose the source of gifts received under a will or by inheritance. Also, you do not have to disclose the source of the gifts received from your spouse, parents, grandparents, children, grandchildren, siblings, nephews, nieces, uncles, aunts, cousins, step-relations, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, fathers-in-law, mothers-in-law, or any person to whom you stand in loco parentis, or received by way of distribution from any inter vivos or testamentary trust established by a spouse or ancestor.

IF NONE, CHECK HERE ☐

1	Republican Senate Campaign Committee	2	University of Dayton
3	Ohio Chamber of Commerce	4	Ohio State University
5	Ohio Dermatological Assn	6	
7		8	
9		10	
11		12	
13		14	
15		16	

10. MEALS, FOOD AND BEVERAGES

List the source of each payment of expenses for meals and other food and beverages received in connection with your official duties that exceed \$100 aggregated for the calendar year 2019. Expenses include payments or reimbursements to you. You must include the General Assembly if it was the source of expenses or reimbursements for meals, food, or beverages totaling over \$100 for the calendar year 2019.

You are not required to disclose the source of meals and other food and beverages provided at a meeting at which you participated in a panel, seminar, or speaking engagement; or at a meeting or convention of a national or state organization to which any state agency, including, but not limited to, any legislative agency or state institution of higher education as defined in Section 3345.011 of the Revised Code, or any political subdivision in Ohio pays membership dues. Nor must you disclose any meals or beverages, which have been reported in Section 8 above as travel expenses paid by the General Assembly.

IF NONE, CHECK HERE ☐

1	Republican Senate Campaign Committee	2	
3		4	
5		6	
7		8	

11. NON-DISPUTED INFORMATION

Lobbyists and their employers are required to report expenditures made for the benefit of, or on behalf of, State public officials and certain designated staff members. If you received a statement from a legislative agent, or the employer of a legislative agent that identifies you as the recipient of an expenditure(s) made by that lobbyist or employer, and you do not dispute the information contained therein, attach a copy of the statement or list the non-disputed information below. If you dispute a lobbying expenditure made in your name, please contact JLEC at 614-728-5100.

You can monitor reported lobbying expenditures at any time by visiting the Ohio Lobbying Activity Center at www.ohiolobbying.com.

PLEASE SEE ATTACHMENT "NON-DISPUTED INFORMATION REPORT";

☒

I HAVE NO NON-DISPUTED INFORMATION TO REPORT;

☐

I PREFER TO LIST MY NON-DISPUTED INFORMATION BELOW:

☐

1	2
3	4
5	6
7	8

12. LICENSES

Any member of the General Assembly who engages in the conduct or practice of a particular business, profession, trade, or occupation that is subject to licensing or regulation by any branch, department, division, institution, instrumentality, board, commission, or bureau of the state, is required to file a notice that he or she is the holder of a particular license, or is engaged in such activity, as part of the financial disclosure statement. Therefore, if you are a member of the General Assembly, list all licenses held or a description of any regulated activity.

IF NONE, CHECK HERE

☐

License(s) Held	medical license OH 06-5377
Regulated Activity	Practice of Medicine

BEFORE SIGNING THIS STATEMENT, PLEASE REVIEW EVERY QUESTION TO MAKE CERTAIN YOU HAVE DISCLOSED THE NECESSARY INFORMATION OR, IF YOU HAVE NOTHING TO DISCLOSE IN A GIVEN QUESTION, YOU HAVE CHECKED THE BOX MARKED "NONE".

IF THE ANSWER TO ANY QUESTION IS OMITTED, THE STATEMENT IS INCOMPLETE UNDER THE LAW AND WILL BE RETURNED TO YOU.

PERSONS WHO FAIL TO FILE A COMPLETE STATEMENT BY THE APPROPRIATE DEADLINE MAY BE ASSESSED A LATE FILING FEE OF \$10.00 FOR EACH DAY THE STATEMENT IS LATE, UP TO A MAXIMUM OF \$250.00. A KNOWING FAILURE TO FILE IS A MISDEMEANOR OFFENSE.

ACKNOWLEDGMENT

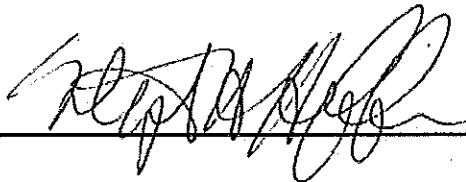
By signing below, I swear or affirm that this statement and any additional attachments were prepared or carefully reviewed by me and constitute a complete, truthful, and correct disclosure of all required information.

By signing below, I acknowledge awareness and understanding of Sections 102.02(D) and 2921.13(A)(7) of the Ohio Revised Code which prohibit me from knowingly filing a false statement and which are criminal misdemeanors of the first degree, punishable by a fine of not more than \$1,000 or imprisonment of not more than six months, or both. (See Revised Code Sections 102.99(B), 2921.13(F)(1), and 2929.21.)

By signing below, I acknowledge that I am required to pay a **\$40 FILING FEE** (made payable to JLEC), or that I am, or was, an employee (non-elected) of the General Assembly, or any legislative agency and that my agency will be invoiced at a later date.

This financial disclosure statement is a public record upon filing and is made available for public review on www.ohiofds.com.

Your Signature is Required



Date

5/10/2020

NOTE: No person is required to file more than one financial disclosure statement for any given calendar year with the appropriate ethics agency. If you are a member of the Ohio General Assembly you will file the JLEC statement with the Joint Legislative Ethics Committee regardless of your status as a former local or statewide officeholder, candidate for local or statewide office or service on a state board or commission. If you are a member or employee of the General Assembly and receive a Financial Disclosure Statement from the Ohio Ethics Commission, DISREGARD the statement provided by the Ohio Ethics Commission.

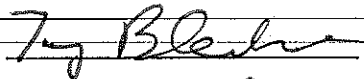
RETAIN A COPY OF THIS STATEMENT FOR YOUR RECORDS

This statement is to be submitted to:

JOINT LEGISLATIVE ETHICS COMMITTEE
OFFICE OF THE LEGISLATIVE INSPECTOR GENERAL
100 East Broad Street, Suite 1910
Columbus, Ohio 43215
(614) 728-5100

FOR OFFICIAL USE ONLY

Reviewed By:



Date:

5/14/2020

Filer answered every question:

X

Filer has not answered these questions:

Date form returned to filer:

__/__/__

Date completed form received at OLIG

__/__/__



Ohio Senate
Statehouse
1 Capitol Square
Columbus, Ohio 43215
(614) 466-4900
Fax (614) 466-6030

Vincent L. Keeran
Clerk of the Senate

January 10, 2020

Senator S. Huffman
862 Buckeye Court
Tipp City, OH 45371

Dear Senator S. Huffman,

During calendar year 2019, you received the following quarterly mileage payments as reimbursement for your round-trip mileage to and from the capitol. The reimbursement rate for 2019 was \$0.52 per mile.

Date	Amount
4/4/2019	\$835.12
7/23/2019	\$911.04
10/4/2019	\$607.36
Total	\$2,353.52

If you have any questions, please contact me at (614) 466-4900 or Erin Hammon at (614) 466-4464.

Sincerely,

A handwritten signature in cursive script that reads "Vincent L. Keeran".

Vincent L. Keeran
Clerk of the Senate



THE OHIO GENERAL ASSEMBLY

JOINT LEGISLATIVE ETHICS COMMITTEE

OFFICE OF THE LEGISLATIVE INSPECTOR GENERAL

100 East Broad Street, Suite 1910, Columbus, OH 43215 • (614) 728-5100 • www.jlee-olig.state.oh.us

To: Joint Legislative Ethics Committee

From: Steve Huffman

Date: 2/7/2020

Re: §11 Non-disputed Information for the 2019 Financial Disclosure Statement to be filed in 2020

I do not dispute the following report of non-disputed information for calendar year 2019. Attachment of this report fulfills my requirements for Section 11.

Rep. Period	Employer	Agent F.Name	Agent L. Name	Type	Bill	Description	Amount	Date
Jan-Apr19	University of Dayton			A		UMass v. UD Men's b-ball tickets for game (senator and guest)	\$103.54	1/13/2019
Sep-Dec19	Ohio Chamber of Commerce			A	NA	Lodging at Salt Fork Conference	\$283.00	9/4/2019
Sep-Dec19	Ohio Chamber of Commerce			A	NA	Salt Fork Practice Golf	\$51.46	9/4/2019
Sep-Dec19	Ohio Chamber of Commerce			A	NA	Salt Fork Trip to the Wilds	\$94.66	9/5/2019
Sep-Dec19	Ohio Council for Home Care and Hospice			A		OCHCH Home Care and Hospice Hero Award	\$72.00	9/18/2019
Sep-Dec19	Ohio Dermatological Association			A		Plaque	\$75.00	10/4/2019
Sep-Dec19	The Ohio State University			A		Cost of Tickets	\$332.00	10/26/2019
Sep-Dec19	The Ohio State University			B		Cost of food	\$20.00	10/26/2019
Sep-Dec19	JobsOhio			B		Dayton Development Coalition Legislative Reception at The Kettering Tower	\$39.65	11/18/2019
Total							\$1,071.31	