Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

et Address	AVELUE	CT	Office Sought			Dis	strict	
DAYTON	AVELUE)		,	Sta	te A	Zip Code	420)
c of Report	Pre-Primary	Post-Primary	Pre-General		Post-Gen	neral	Annua	l Yea
ce X to the left of rep)	July Monthly	August Monthiy	September Monthly		Terminat	noi.	Semia	nnua
nded Report?	Yes No Report Electronically F	Filed? Yes No Date	of Election	M		D		Y
	Amount brought forward Total monetary contribut			556	777			
	2. Total monetary contribut	ions (From Form No. 31-A)						
	3. Total other income (From	Form No. 31-A-2)	s .					
	4. Total funds available (sun	a of lines 1, 2, 3)	: 312	626	9.5	MON	20	
:	5. Total monetary expenditu	res (From Form No. 31-B)	5 218	478	19	OAR	2016 OCT 27	-
	6. Balance on hand (line 4 m	tinus line 5)	: 99	148	76	- P	127	
	7. Value of in-kind contribu	tions received (From Form No. 31-J-1)	s			BOARD OF ELECTING	PH	VIOLUTE I
	8. Value of in-kind contribu	tions made (From Form No. 31-J-2)	s				2:5	0
	9. Outstanding loans owed i	9. Outstanding loans owed by committee (From Form No. 31-C)				- C.	Si	
	16. Outstanding debts owed	s.						
	11. Outstanding loans owed	to committee (From Form No. 31-K)	s					
	12. Value of independent ex	penditures made (From Form No. 31-U)	s					
	13. For Electronic Filing En	tities only nount of any new loans received this perio						

Contribution 19

MICHAEL VOELKL TREAS
Print Name and Title (Treasurer and Deputy Treasurer only)

Exponditure 6

Other pages 5

Total 30

Page ____

Prescribed by Secretary of State 03/05

Name of Committee in Full				
NEIGHBORHOODS FOR DA	YTONS FU	TURE		
Full Name of Contributor			Registration Number, if	PAC
DPSU LOCAL 101 Street Address				
Street Address 15 G WES	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
DAYTON	04	45402	878616	1000.00
Full Name of Contributor			Registration Number, if	PAC
KERY GRAY				
	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.)
3243 REDGE AVE				
	State	Zip Code	M D Y	Amount
DAYTON	DH	45414	07061	600 60
Full Name of Contributor		,	Registration Number, if	PAC
M.O. EPAPLY DIGGS J	R			Form (Cook Charle etc.)
Street Address	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.)
City LATZE	State	Zip Code	M D V	Amount
	D#	45409	08101	50000
DATED U Full Name of Contributor		43401	Registration Number, if	
JESOME PATRICIA TATAR				
	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.)
525 W. DAVED City				Amount
City	State	Zip Code	M D Y	1000
Poly D V	OF	45429	081016	- 10-10
			Registration Number, it	PAC
HONSER TOA Street Address				Form (Cash, Check, etc.)
851 PATTERSON BLYD City	Employer/Occup	ation/Labor Organization		
City	State	Zip Code	MDY	Amount
	02	45402	0810 4	5 1000 · 00
Tayror Full Name of Contributor		10 10 00	Registration Number, in	PAC
Street Address 176 RAVEILE CT City				Constitute to the control of
Street Address	Employer/Occup	oation/Labor Organization*		Form (Cash, Check, etc.)
176 RAVEILE CT				CAE CK Amount
City	State	Zip Code	M D Y	
City Payrow Full Name of Contributor	674	115420	081011	
	- 1		Registration Number, it	PAC
Street Address	Fare Lange (C	pation/Labor Organization*		Form (Cash, Check, etc.)
	Employer/Occup	autow Labor Organization		LAECK
City STARTHONDOR LOSSENS	State	Zip Code	M D Y	Amount
Darren	DX	15429	091016	200.00
Full Name of Contributor			Registration Number, i	
Street Address ASSOCIATES LT	D			
Street Address		pation/Labor Organization*		Form (Cash, Check, etc.)
		Tax is		LHELK
City	State	Zip Co45 409	M D Y	6 250 . D
DASTON	DK		28/01	6 230

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)]

Prescribed by Secretary of State 03/05

1

Name of Committee in Full NETCHBOX HORDS FOR D	PAYTER E		
Full Name of Contributor		Registration Number, i	FPAC
KENNETH COUCH & VILL	LAY		
Dream A drivens	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
6215 ACTUAN RELOGIOS			CHECK
City	State Zip Code	M D Y	Amount
DAVION	0 H 45424	00111	6500
Full Name of Contributor	-1 .	Registration Number,	if PAC
AMMI CEEMEN,	10		Form (Cash, Check, etc.)
Street Address W GRAND A	Employer/Occupation/Labor Organization		CHECK
City	State Zip Code	M D Y	Amount
DASTON	0 H 45402	08111	6 500'00
full Name of Contributor		Registration Number,	ifPAC
AARDN SORAELL			I and the second
128 Mc DANSEL ST	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	Stalte Zip Code	MI DI Y	Amount
DAGTON	017 45495	28/11	15000
Full Name of Contributor	7. 1.0,0	Registration Number,	ifPAC
Ohlunus Good I	de		
1605 W MAIN ST	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.
City	State Zip Gode	- M D 3	Amount
DAYTON	e + 45405	08121	6/000
Full Name of Contributor		Registration Number,	ifPAC
DAYTON PARTS LO			
Street Address	Employer/Occupation/Labor Organization	. :	Form (Cash, Check, etc
22) 150 57	State Zm Code	I ME I DI I	CHECK
Davina	OH 4540)	DX 7 3 1	Amount .00
Full Name of Contributor	10999	Registration Number	
FAREET FRELAND COX			
	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.
HON MAIN ST			CAFCK
City	State Zip Code	MDD	L SOO . SO
Full Name of Contributor	04 45402	Registration Number	
	DARADO	Registration Number	, ii PAC
Street Address	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.
880) METRENS			CHISIK
City	Soute Zip Code OH 45315	MD	Amount 500
Full Name of Contributor	10 H 190/3	Registration Number	
		- AMERICAN MARIOE	,
Street Address	Employer/Occupation/Labor Organization		Form (Cash, Check, et
Street Address L140 GANDER AD			CHER
City	State Zip Code	M D	V: # A spensen!
DATION	0 4 45424	08231	\$ 500,00

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

Page 3

Prescribed by Secretary of State 03/05

Name of Committee in Full	1	-		
NEIGHBORHOODS FOR	- LAYDA	IS TUTARE		
Full Name of Contributor			Registration Number, if P.	AC
DRIAN INDERSIEDE	U			
Street Address		ation/Labor Organization		Form (Cash, Check, etc.)
33 KLUNEWOOD				CAECK
City	State	Zip Code	M D Y	Amount
DAYTON	0 4	45709	082316	350, 50
Full Name of Contributor			Registration Number, if P	AC
PARL & HORY SHEETHAN				
Street Address	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.)
5500 SIGNET				CHECK
City	State	Zip Code	M D Y	Amount 250.00
CANON CONTRA	OH	45424	08 23 15	250
Full Name of Contributor			Registration Number, if P	AC .
WECKPEL 3 CARPARA ETTE	28_			
Street Address	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.)
6434 FERITAGE				CHECK
City	State	Zip Code	MDDY	Amount ,
CALLED O	071	4724	08/2016	
Full Name of Contributor			Registration Number, if P	AC
STEINAN MARCELLA	3			
Street Address	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.)
City AUDUPON	6.1	Tr. C.		CRECE
City	State 21	Zip Code 45402	M 2 2 1 2	Amount Z50 . 00
Full Name of Contributor	WA	7090-	Registration Number, if I	
First Action			Registration Number, if I	AC
Street Address 1360 E SIEDTIMER	F10	ation/Labor Organization*		Form (Cash, Check, etc.)
1210 E STEENTHER	Employer/Occup	auon/Labor Organization	. :	1.511)
City	State	Zip Code	M D Y	Amount
SAMON	04	45414	08 2316	250 - EV
		10111	Registration Number, if I	
Full Name of Contributor BRIDE 11 LANGE WALET Street Address City 114 BRISTER Ci	· ·			
Street Address	Employer/Occur	ation/Labor Organization		Form (Cash, Check, etc.)
11121 1604512RE				CHELL
City	State	Zip Code	M D Y	Amount
DAYTON	OH	45419	0823/2	22000
Full Name of Contributor			Registration Number, if I	
KRED INNER WEETS				
Street Address JAG FAR HILLS	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.)
3109 FAR HILLS				LHEIR
City	State	Zip Code	M D Y	Amount 600
PAYTON	074	45424	082316	PD
Full Name of Contributor			Registration Number, if I	PAC
GRUNGE FOR GNLINEER (AMPATE U			
Street Address		nation/Labor Organization		Form (Cash, Check, etc.)
7154 MOHAWR RD				CHECK
City	State	Zip Code	MDY	Amount 1000 M
DAYTON	0 14	45459	086316	1000

Page Total \$ 2700'00

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

Page 4

Prescribed by Secretary of State 03/05

Name of Committee in Full .				
Name of Committee in Pall NETCHBERHOOD FOR	1 Dayons	x Finest		
			Registration Number, if P	AC
Street Address	- 11-0.	4 5-3-2-	Transaction Transaction I	
Street Address	Employer/Occurs	tion/Labor Organization		Form (Cash, Check, etc.)
10955 PAPTHER CREEK	. Zinpioyot/Occupa	AND STREET		CATCH
City	State	Zip Code	MDY	Amount
BRADORD	0 +5	45308	082016	250
Full Name of Centributor			Registration Number, if P	AC
STEPHANTE LLOOK				
Street Address	Employer/Occupa	ation/Labor Organization		Form (Cash, Check, etc.)
LLOD ZEKKLE	Cub	175 Code	IM IN IN	CHICK
SPRINGPIELS	OH	Zip Code 45502	0 87704	Amount 50-8
Full Name of Contributor	1 7 71	1/0-	Registration Number, if P	AC
CLOWN SERVICES S	INC .		The state of the s	
Street Address		ation/Labor Organization*		Form (Cash, Check, etc.)
P.O. Bon 1848				CHEEK
City	State	Zip Code 4549/	MDY	Amount
DAYTON	OH	45401	08242	3000.00
Full Name of Contributor			Registration Number, if I	AC
BEJBY JOHN				
	Employer/Occupi	tion/Labor Organization		Form (Cash, Check, etc.)
5280 GANDIA KD	State	Zip Code	M IN V	
DAYTEN	OH	45424	ORZLIL	Amount 250 - 00
Full Name of Contributor		1/0/	Registration Number, if I	PAC
Tore & JEFF BANKSTER				
	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.)
105 DEETER			•	CHECK Amount
City	State	Zip Code	M D Y	Amount 2500
ENGLEWBOD	0 11	45315	082616	
Full Name of Contributor			Registration Number, if	PAC .
STEPHEN KINK	E-1	ori		Form (Cash, Check, etc.,
9253 GREAT LAKES CA	Employer/Occupa	ation/Labor Organization		CAECK
City_	State	Zip Code	MDY	
City DAYTON Full Name of Contributor	BH	45458	082016	250
			Registration Number, if I	PAC
CHRES & REJER CANCELL				
Duoci Auntas	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.)
674 ARROWAEAD				CHECK
SEDVLY	State ()	Zip Code	M	Amount
Full Name of Contributor	DI	45365	Registration Number, if	250'0
DAVID SHADE		:		· · · · · · · · · · · · · · · · · · ·
Street Address	Employer/Occurs	ation/Labor Organization*		Form (Cash, Check, etc.
4537 LARCH TREE	Zanpioyan osoup	- Commente		
City	State	Zip Code	M D Y	Amount 250'00
DAYTON	OH	43424	083016	250

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)]



Prescribed by Secretary of State 03/05

Name of Committee in Full				
NEIGHBORHOODS FOR DAM	DIUS F	UTURE		
Full Name of Contributor			Registration Number, if P	AC
Street Address	Employer Occups	nion/Labor Organization		Form (Cash, Check, etc.)
8228 PHERSANT HILL				CHECK
City	State	Zip Code	M D Y	259. 71
DAYDN Full Name of Contributor	OH	45424	083016	259
-			Registration Number, if P	AC .
Street Address	Employer/Occups	ntion/Labor Organization*		Form (Cash, Check, etc.)
955 WEST ME NSTER PL				CHECK Amount
City	State	Zip Code	MDDY	375 80
Payton Full Name of Contributor	QH.	45419	Registration Number, if P	
JEFFREY PAYNE Street Address			programmed strangers, in a	
Street Address	Employer/Occupe	ntion/Labor Organization*		Form (Cash, Check, etc.)
6617 MZ DANJEL RIPGE		T		Amount 500°80
City.	State	Zip Code 45424	083016	Amount SO
PAYTOU Full Name of Contributor	JOH	70729	Registration Number, if F	A
MAURICE GVANS Street Address				
	Employer/Occupa	ntion/Labor Organization*		Form (Cash, Check, etc.)
1525 WESLEYAN	State	Trin Code		CHECK
DAYTON	0#	Zip Code	210580	Amount SOD
Full Name of Contributor	1011		Registration Number, if F	
BARB LA BRITER				
Street Address	Employer/Occupa	ntion/Labor Organization®		Form (Cash, Check, etc.)
Street Address 425 DAYTON VOWERS # 76 City	State	Zip Code	M D Y	
DAYTOU	OH	45410	083016	Amount DOD
Full Name of Contributor			Registration Number, if P	the state of the s
CBD STRATEGIC LIC				F - 12 - 1 - 1 - 1
3800 PENTAGON BE	Employer/Occupa	ation/Labor Organization		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	CHECK-
BEAVERCREEK	QH	45431	083016	1000
Full Name of Contributor			Registration Number, if I	AC
Street Address	E1	ain Anton On the Control of		Form (Cash, Check, etc.)
B41 E 41# 5T	Employer/Occupi	ntion/Labor Organization		CHECK
City	State	Zip Code	MODY	Amount
DAYTON	0 4	454 QI	083016	1800
Full Name of Contributor			Registration Number, if F	PAC
Street Address	Employer/Occurs	ation/Labor Organization		Form (Cash, Check, etc.)
3053 SPRING3020 RD W	ampioy directupe	Salara Organication		D .
City	State 2	Zip Code	MDY	Amount 200
DAMON.	8 M	190107	688B1 E	1000 .

Page Total \$ 963 4.71

^{*} 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 6

Prescribed by Secretary of State 03/05

Name of Committee in Full				
Name of Committee in Full	too D	with the French	100	
NOTE HOOR HOUDS	JUK DA	1910D3 91 WV	Registration Number, if I	AC .
			Registration Number, it i	AC
JEFFREY HEMS	T			Form (Cash Charle etc.)
Street Address 40 SHANSON ST	Employer Occupat	tion/Labor Organization		Form (Cash, Check, etc.)
	Control	12:-0-1	14 15 14	CHER
City DA 12 S	State	2ip Code 45402	Madali	Amount
DAYPOS	UH	7-102	0902/6	1000
Full Name of Contributor			Registration Number, if I	AC
Jost Williams				
Street Address	Employer/Occupat	tion/Labor Organization		Form (Cash, Check, etc.)
1229 SKUMYVEEN				CH GUL
City DATION OH	State	2ip Code 454 06	DO OX	Amount 600
	14	43100	0000	
Full Name of Contributor			Registration Number, if	PAC
CAPTURUS FOR CHRISS	CIRCU			
Street Address	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
2241 GERMANTEWU				CHECK
City	State	Zip Code	MOCO	Amount Sa
DRYGON	014	45417	7 02 16	
Full Name of Contributor			Registration Number, if	PAC
MILITAGORE & CONTRACTOR	.5			
Straint Address		tion/Labor Organization*		Form (Cash, Check, etc.)
7740 REINHOW IR				Amount
City	State	Zip Code	MDY	Amount
CEN COUNDED	0 4	45237	0504	500
Full Name of Contributor			Registration Number, if	PAC
FRIEND OF WAN WHALE	9			
Succi Addiess	Employer/Occupa	tion/Labor Organization		Form (Cash, Check, etc.)
443 E 674 ST				CHECK
City	State	Zip Code	MDY	Amount
DATTO	04	45402	090010	500
Full Name of Contributor			Registration Number, if	PAC
OLio Couver 18 AFS CM Street Address	-			
	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
6800 W HJEH 5				CHECK
City	State	Zip Code	MDY	Amount
WERTHENETON	BH	43085	090616	5000 00
Full Name of Contributor	•		Registration Number, if	PAC
LEARN TO EARN DATE	01/			
Street Address		tion/Labor Organization		Form (Cash, Check, etc.)
4801 SPRINGFIELD SI				CHECK
City	State	Zip Code	M D Y	Amount 300
DATTON	0H	1975)	0906/6	
Full Name of Contributor			Registration Number, if	PAC
Street Address 4359 INTERNALY				
Street Address	Employer/Occupa	tion/Labor Organization		Form (Cash, Check, etc.)
4359 INSTRINARY				CHECK
City	State	Zip Code	M D Y	Amount 2000
Miamiobank	014	45342	07 06/	2000

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 7

Prescribed by Secretary of State 03/05

Name of Committee in Full . NEIGHBEN HOOKS FOR DAY	TONS FI	TURE		
Full Name of Contributor Susan Wood Huse			Registration Number, if F	AC
Street Address				Form (Corb. Charle sto.)
1206 DAXWOODAN	Employer/Occupa	tion/Labor Organization		Form (Cash, Check, etc.)
DATTO & OH	State	Zip Code	090616	Amount DOO B
Full Name of Contributor			Registration Number, if F	AC
FRIENDS OF MATT JOSE	141			
Street Address 443 E SENTA ST	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
DATTON	OH	2/5702	090000	1000
Full Name of Contributor THE SIEBENTHALER G			Registration Number, if I	AC
Street Address 3001 CARRIED DR	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	IM IN IV	Amount
Darrow	OH	45405	090616	5000
Full Name of Contributor GARY SARCHET DICK STE	EN)		Registration Number, if I	AC
Street Address 289 E South ST	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
Jaros .	11-1	45402	090616	500
Full Name of Contributor VINCENT CONSADO			Registration Number, if I	AC
Street Address	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
Street Address 8801 ME FRISCL				CHECK
GERANTON	O H	153)5	89 De 16	Amount (2)
E UN CONTRACTOR	0.		Registration Number, if I	AC
DENSMORE & STORE LLY	PR	2		
Street Address		tion/Labor Organization		Form (Cash, Check, etc.)
255 E 57h ST	State	Tria Code	IM IN IM	Amount
CINCINAPAI	OH	Zip Code 45202	090916	MOUD.
Full Name of Contributor HUNTWENDER MATTE BANK			Registration Number, if I	AC
Street Address P. D. Bok 1558	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.) CHECK
City	State	Zip Code	MDY	Amount
Conumbies	olt	43219	090916	2500
Full Name of Contributor ROBEL 64455			Registration Number, if I	AC
Street Address	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
Street Address 321 FAIRFURET LA				CHECK Amount &
City	State	Zip Code	M D Y	Amount
DAYTON	of.	45419	090916	10,000

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)]

31-A 3 R.CA3517.10

Statement of Contributions Received



- Prescribed by Secretary of State 03/05

Name of Committee in Full				
NETHBORHOODS FOR JAME	nus trevus	RE		
Fruit retrie of Contributor			Registration Number, if PA	C
COAT INTEGRATED SY	PIFAS	4 2		
Street Address	Employer/Occupation	/Labor Organization		Form (Cash, Check, etc.)
Street Address 133 S KEDWEE 67 City				CHECK
City	Same 2	Cip Code	MDY	Amount DD
DATTER	OH	45402	090916	2000
Full Numbe of Contributor	1 1		Registration Number, if PA	the second secon
Full Name of Contributor WESTON PAC				
Street Address A	Employer/Occupation	Wales Opening in a		Form (Cash, Check, etc.)
1101 PENNSYLVANTARVE	. Employer/Cocephage	ATSTOL CARRIENTER	:	1.15-10
City	State 12	in Code	MIDIY.	CHECK ANDOUGH
Wasin 19701	DIC	2000 4	090911	1500 D
City SHOWSTON Full Name of Contributor		2000 T	Registration Number, if P	The second name of the second
REET THE ALLESTOR			Transport removed at 2.2	
Street Address	- · · ·			Figure (Cast Chart etc.)
241 TOPTON DR	Employer/Occupation	VLEDOT OTGENEZANON		Form (Cash, Chack, etc.)
City /	0 mm	Fin Code	IM IN IV	4
	OH	45 377	60 00 16	Total Marie
VANDALIA	011	40-1	Registration Number, if P	200
Street Aldress			acegistration redinoct, it F2	
CONTER A PERASSON				From (Carlo Charle etc.)
Street Address 115 LINGOOD & #111	Employer/Occupation	/Labor Organization		Form (Cash, Chack, etc.)
113 4160000 1 471	0-1- 10	F. O. F.	IMINIM	
City	O H	LASTO)	10 11/2	SOD 200
Full Name of Contributor	1011	7-7-	Registration Number, if P	
Street Address			refinition senter, a to	ac.
South Harm	1=			From (Cosh Charle are)
4595 GINNERSING BO	Employer/Occupation	Maker Organization .		Form (Cash, Check, etc.)
City	Code 15	To Code	IMINIM	
HINDER HELLINS	OH	2453124	200912	250.00
Full Name of Contributor	. 01	72721	Registration Number, if P	
			wellensoon tansact' it to	ac .
MALL PREDICTS CORP				E (Cal Carl as V
22	Employer/Occupation	/Labor Organization		Form (Cash, Casak, etc.)
88 MARKET ST			141214	CHECK
City	Same 1 2	Cip Code	MODELL	3500:00
SADDLE BROSK	1/1/	07663	Registration Number, if P	asco.
4.1 /			Regulation Number, 11 19	ic .
Street Address	1			Form (Cash, Check, etc.)
1	Employer/Occupation	/Labor Organization		rum (Casa, Chack, etc.)
4977 NORTHCUTT TE	Com. In	in Code	MINIV	CHECK
Day-1	011	45414	10000	5000
Full Mame of Contributor		707/7	Registration Number, if P	
0			Magantanion remittee, il Pr	
NUMBKE Street Address				Form (Cash, Check, etc.)
	Employer/Occupation	/Labor Organization		rum (casa, casa, etc.)
10795 HUGHES RD	Cont.	- Code	M P V	CHECK
City Company	Strine Z	ip Code	May 12	SAD ON
COTO CHURT	017	45251	19/13/6	200

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 9

Prescribed by Secretary of State 03/05

Name of Committee in Full . MERALBURATOR DE FOR-	Desmois	FUTURE		
Full Name of Contributor MV COMMERLEM LONST.	<i>D</i> 1000		Registration Number, if P.	AC
Street Address PO BOX 744	Employer/Occupat	tion/Labor Organization*		Form (Cash, Check, etc.)
DAYROU	State #	Zip Code 45401	09/3/6	10,000 D
Full Name of Contributor CHAREL			Registration Number, if P	AC
Street Address 1985 FOUNDERSDO	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
DATTER	State	Zip Code 45420	09/3/6	CHECK Amount 1000, 00
Full Name of Contributor Second Amounts			Registration Number, if P	AČ
Street Address 405 CLEAR 3 PRINCES City	Employer/Occupa	tion/Labor Organization®		Form (Cash, Check, etc.)
SARTHUE BORD	State	Zip Code 45066	29/3/6	Amount 250° (2)
Full Name of Contributor EDMMETTEE PO REEP M.	all Does	w5	Registration Number, if P	AC
3927 SADOLE RECE CL	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.) CHECK
DAYDW	State &	Zip Code 4 53 14	090916	Amount 500
Full Name of Contributor ABCORL INC			Registration Number, if P	AC
Street Address 222 WHAREN ST	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
DAYTON	State	2ip Code 45402	09/2/6	Amount 500
Full Name of Contributor PANS 5 6 RENE 7 Street/Address			Registration Number, if P	
Street Address ST WARREN ST	Employer/Occupa	tion/Labor Organization		Form (Cash, Check, etc.)
DATION	State D H	Zip Code 43402	09 1516	Amount
Full Name of Contributor 34 & JEFFERSON LL			Registration Number, if P	AC
Street Address 960, STRT 725	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
City DAYTON	State	Zip Code 45759	09/5/6	Amount 2500
Full Name of Contributor GRENTER DATTON AREA HOST	Assoc		Registration Number, if P	AC
Street Address 241 THYLOR ST SETTE 130	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
DATERN	State O H	Zip Code 45402	09/3/6	Amount 30,000

Page Total \$ 45750.50

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 i 3/00 .00

· Prescribed by Secretary of State 03/05

Name of Committee in Full	5	4 E		
NEIGHDOR HODDS FOR Full Name of Considers	DA 4700	3 FUTURE	Registration Number, If P.	AC
ROBER DESECK IF		7"		
Street Address 6600 KEZTON	Employen/Occup	etien/Labor Organization		Ferrer (Cook, Check, etc.) CHECK
DATEON	Some O /+	Zip Code 45424	M D Y 6	SOO' BO
Full Name of Contributor RECHARD BEALL			Regiszzaion Number, if P	
Street Address	. Employer/Occup	etion/Lehor Opponention		Form (Cosh, Check, etc.)
3810 WELLES DAK	nut.	172-5-4	11111111	CHECK
DATTON	OH	Zip Cods 4542年	09/6/16	500 .
FRED STOVALL			Registration Number, if P.	AC .
Street Address 2304 BRIDGEPORT	Employer/Occup	escon/Laker Organization*		Ferran (Cash, Oscik, ste.)
City	Stein J-4	Zip Code 45406	M D Y	Amount as
Pull Name of Contributor	10/11		Registration Number, if P	
Street Address	Employen/Occup	ntion/Lebur Organiszaion*		Form (Cosh, Cleak, stc.)
City	State	Zip Code	MPY	ADDRESS
DAYTON Full Name of Contributor	O H	45431	Registerson Number, if 1	AC AC
JOS & HEATHER PARZETTE	- In			Form (Cash, Chank, etc.)
3904 GOPPER LANE BL		mine/Labor Organization*		CHEST
DAYDON	DH	4524024	09/6/6	520.07
Full Nesses of Contributor CODE CU			Registration Number, if I	AC .
355 6. HOLUMENT AD		sties/Leber Organisation		Force (Child, Charle, etc.) LHECK
City DAYTON	Stele	Zip Cede 45-402	09/6/6	
Full Nesse of Contributor	10.17		Registration Number, if I	
LECHTCAP Street Address	Employer/Occup	otion/Lukor Organization*		Ferm (Carls, Orack, etc.)
City STANTON	Steller	Zip.Cede	MDY	CHELL ADD ON
SPECUS BOTZD Full Name of Complessor	04	45020	Registrenen Number, if I	1
Street Address	Barde N	enius/Labor Organization		Form (Cash, Greek, stc.)
	Employer/Useup		•	
City	State	Zip Code	M D Y	Amount

Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, this occupation and the same 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 camployees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Page 1

Prescribed by Secretary of State 03/05

Name of Committee in Full NATCHBORLY OFF FOR PAY	MANS ESTA		
Full Name of Contributor		Registration Number, if P	AC
THOMAS WHELLEY			
Street Address 1100 COLATAQUE PLAN	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
Спу	State Zip Code 45424	09 27 16	Amouni 230 · 00
Full Name of Contributor	E 14 7074	Registration Number, if P	-
DOLL VOUNSON FRAD			
Street Address III by FFRST ST	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
City	State Zip Code	MDY	Amount
DATTON	e & 45482	092786	500
Full Name of Contributor CDO TECHNOLOGY 3		Registration Number, if P.	AC .
Street Address	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
5200 SALTWEFT 34 D			CHECK
City	State Zip Code	AG 34 CZ	Amount
Full Name of Contributor	1 4 93731	Registration Number, if P	1000
FEXET FENDREDAN BAN	R		
Street Address 300 NY64 55	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
City	State Zip Code 2) 50 1)	MDY	Amount
Full Name of Contributor		Registration Number, if P	1500°
CHLM HISTENSINE	1643		
Street Address	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
9191 5. JAMASCH 5T	State of Zip Coste	M D Y	Amount 5 was a
18 06 L 5 WOOD	A POSIC	092716	3000
Full Name of Contributor	1.0	Registration Number, if F	AC
SCHIRE PATTON BOLGS L			Form (Cash, Check, etc.)
KEY TOWER	Employer/Occupation/Labor Organization		CHECK
City	State Zip Code	M D Y	Amount
CLEVELAND	0 H 44114	093016	750.00
Full Name of Contributor SUNDAE PATTON BOSGS LLV Street Address	PPAC	Registration Number, if P.	AC
Street Address PATTON BOGGS LLV	Employer/Occupation/Labor Organization	-	Form (Cash, Check, etc.)
2550 M STREET NW			CHUCK
INASHINGTON DC	D C Zip Code	093016	Amount 250
Full Name of Contributor Holly word 6AMEN 6		Registration Number, if P.	AC /
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City HOlywood DL	State Zip Code	M D Y	Amount
DAYTON	DH 45414	093016	1500

Page Total S /3250.00

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



Prescribed by Secretary of State 03/05

Name of Committee in Full			
NEIGHBORHOOD FOR DE	TOUS FROME		
Full Name of Connibutor		Registration Number, if PA	C
ANN SCHENKING			F (0 1 0 1 - 1)
3711 HELLMONT.	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
City	State	MODEL	Amount
Sull house of Coursings	15 12 13 77 7	Registration Number, if PA	100
Aleve & Susan CARLAND			
Street Address	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
15 GOLAWAY		•	Clack
3 PRINCEURO	State Zip Cody USDLG	MODE	Amount SO
Fall Nerse of Contributor	E 17 70000	Registration Number, if PA	
TROWAS & JANET LASLEY			
Street Address	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
City 1880 STAUZEY Kill	State Zim Code	M D V	Amount
CENTERYTHE	State Zip Cooks 4545 9	09/19/6	1000
Full Name of Contributor		Registration Number, if P/	ic .
WORLTERT IN			No. (Oak Oak as V
4454 ISTA GEBER	Employer/Occupation/Labor Organization		Form (Cash, Clasck, etc.)
City	State Zip Code	M D Y	Amount . 2
182500W	018 15430	Registration Number, if P	1god
Hobbs Las Pipril		Registration Number, it Py	
Street Address .	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
2516 NORDIC RD	,	IM IN IM	CHECK
DAY TON . TO	State Zip Code 2452413	092216	/ood DO
Full Name of Contributor		Registration Number, if P	
DANES BLOG CONST. LO	1		Form (Cash, Check, eec.)
3233 WENDHARK DO	Employer/Occupation/Labor Organization	•	CHECK
City	State Zip Code	MOZZ	AMOUNT DES
Miamisher	OH 45342	Regission Number, if PA	C .
LWC			
Street Address	Employer/Occupation/Labor Organization		Form (Circle, Check, etc.)
4/4 E) 57 ST	Steps Zip Code	M D Y	Amount
DATTON	0 H 45402	092316	5000.00
Full Name of Contributor PASSERD ASSEL WILL Street Address		Registration Number, if P/	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Clock, etc.)
13453 NMEN TO			CHECK.
LICKS OF VILLE	Strate Zip Code F 4 32218	09 231	S DED
The company of the control of the co	00010	10/2016	0000

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 13

Prescribed by Secretary of State 03/05

N				
Name of Committee in Full NATHBORPHOOD FOR I	AYTOUS ,	FUTARE		
Full Name of Contributor ### Host			Registration Number, if	PAC
Street Address Lockleder	Employer/Occup	oation/Labor Organization®		Form (Cash, Check, etc.)
City BETHESDA	State	Zip Code 20812	09 23	Amount 1000
Full Name of Contributor			Registration Number, if	PAC
Street Address 200 E RANDOLPH Suite TA	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.)
City LDO C CANDOLPTI			M D Y	Amount po
CATCAGU Full Name of Contributor	I L	60601	e 9 2 3 1 4 Registration Number, if	Amount 1008.00
LYPN LETBOWITZ Street Address			110000000000000000000000000000000000000	
3) BELLE HERDY DR	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City GREEDWOOD VILLER	CD	Zip Code 80 121	092318	Amount 44
Full Name of Contributor DORA & HARK DONALY		,	Registration Number, if	PAC
Street Address 40 3 67 18 200 E	Employer/Occup	oation/Labor Organization*		Form (Cash, Check, etc.)
City Dayson	State	Zip Code 45407	M D Y	Amount
Full Name of Contributor PAPTEN BUSTUES (2)	2000		Registration Number, if	
Street Address		pation/Labor Organization®		Form (Cash, Check, etc.)
City _ LARDER ST# 930	State	Zip Code	M D Y	Amount
Full Name of Contributor	OH	45402	09 23 14	2500.00
GREWEL FORESTE INCOL CA	AMPASTON	,	Registration Number, if	PAC
Street Address 7154 MOHRWK TR		pation/Labor Organization		Form (Cash, Check, etc.)
DAYTON	State 8 14	Zip Code 45459	9271	Amount
Full Name of Contributor DE LOLAN		1700-1	Registration Number, if	PAC
Street Address	Employer/Occup	pation/Labor Organization®		Form (Cash, Check, etc.)
City _	State	Zip Code 45402	M D Y	Amount
Full Name of Contributor	04	191900	Registration Number, if	PAC DO
Street Address	P. 1 12			Form (Cash, Check, etc.)
Full Name of Contributor PARY TYLE L Street Address 302 LAUREN GR DR City ENGLEWOOF		pation/Labor Organization		mo,
ENGLEWEST	State	Zip Code 45372	292716	Amount pop or

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)]



Prescribed by Secretary of State 03/05

Name of Committee in Full LETGIBORY DODS FOR-	DATTOUS FUTURES		
Lam Leasing of Commomol.		Registration Number, if P.	AC
STREET Address BOK 8	Employer/Occupation/Lebor Organization		Forza (Cash, Check, etc.) CHECK Amount
City Date TON Full Name of Contributor	Sante Zin Code O H 45401	093016	Amount 500-60
Full Name of Contributor JOSEFH TUSS		Registration Number, if P.	AC .
Street Address 6574 STELLCREST WAY	Employer/Occapenon/Lobor Organization*		Form (Cash, Clack, etc.)
DATTON	State Zip Code O M 45414	pool is	LOO'SO
Full Name of Contributor Made Lape I SELL Street Address		Registration Number, if P.	AC
38 BEVERLY PL	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
DAYTO W	State Zip Code 245419	100616	Amount
GAYLE ROMINE R		Registration Number, if P	
Street Address 3085 HIGHLANDER DR	Employer/Occumation/Lebor Organization*	: .	Form (Cash, Chack, etc.)
DASTEN	Sante Zip Code	1006/6	Amount GO
LEO GEZEER	,	Registration Number, if I	WC.
Street Address 12 M 425 DATTON TOWER DR	Employer/Occupation/Labor Organization	•	Form (Cash, Oscik, etc.)
	Scale Zip Code D H 45410	100616	Amount . Po
Full Name of Contributor STEWART ADAM MY		Registration Number, if	AC .
Street Address 3456 INDIAN HILL DO	Employer/Occupation/Lebor Organization		Form (Cash, Casak, etc.)
City RETTERING	State Zip Code 2/5429	100616	Amount DO
Full Name of Contributor	1011. 1319	Registration Number, if F	
Street Address	Employer/Occaspation/Labor Organization*		Form (Cash, Check, etc.)
City DAYTEN	Stepo Zip Code D 14 45406	1000 JK	250 W
Post Name of Committee		Registration Number, if 1	AC
GILBERT TURNER STOR Address 1202 HOOK ESTATEDE	Employer/Occupation/Labor Organization*		Form (Cash, Cleck, etc.)
DA TON	State Zip Code O Ff 45 705	100616	Amount 350

Page Total \$ 1500.00

Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the same 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)]



Prescribed by Secretary of State 03/05

Name of Committee in Full			
NETCHBOKHOUR FOR DA	Trous father		
Full Name of Conributor		Registration Number, if P.	AC
Street Address	Employed Commerciant about Commissions		Form (Cash, Check, etc.)
3857 RIDGE AV	Employer/Occupation/Labor Organization	·	WELL
City	. State Zip Code	M D Y	Amount
DATTO N Full Name of Contributor	0 H 45414	100616	220
Full Name of Contributor	•	Registration Number, if P.	A.C
SHELL ! HEYER ASSO!			Form (Cash, Check, etc.)
1202 SPATIERSON BE	Employer/Occupation/Labor Organization	:	CHECK
City .	State Zip Code	M D Y	Amount
Danon	0 H 5409	100626	50000
		Registration Number, if P.	AC
FLEVAS FLEETE : ARPORT			Form (Cash, Check, etc.)
ISMATO ST # 1800	Employer/Occupation/Labor Organization*		CHECK
City	State Zip Code	M D Y	Amount
DATION	8 11 25-402	100616	1500 00
		Registration Number, if P	AC
REALTON POLITICAL ACTS Street Address	ton Lon		Form (Cash, Check, etc.)
200 & Town ST	Employer/Occupation/Labor Organization		CHELL
City	State Zip Code	M D Y	The second secon
Commen	0 H 43215	100016	1500
Full Name of Contributor		Registration Number, if 1	AC
LEARLY to EAR DATIEN	la		Form (Cash, Check, etc.)
4801 SPRISCHERD &	Employer/Occupation/Lakor Organization		CHEN
City	State Zip Code	M D Y.	Amount
DAYFON	OH 7543)	100616	5000 00
Full Name of Contributor		Registration Number, if	PAC .
DP & L CO Street Address	(n : n : 1 n : 1 n : 1		Form (Cash, Check, etc.)
1865 HOODMAN DR	Employer/Occupation/Labor Organization		CHECK
Cary Cary	Stelle Zip Code	MIDY	
JAY102	State Zip Code O 14 45432	1000/6	25,000
Full Name of Contributor		Registration Number, if F	AC
CAREGOURCE Street Address	E to the state of		Form (Cash, Check, etc.)
230 N MAKN ST	Employer/Occupation/Labor Organization*		CHECK
City	State Zim Code	M D Y	Amend
DATTON	0 4 45402	100618	25,000
Full Name of Contributor		Registration Number, if I	AC.
Street Address	E-L-O		Form (Cash Check are)
498 SEVENTH AV	Employer/Occupation/Labor Organization		2 CHELD
City	State Zip Code	MDY	Amount
NEW YORK	NN 10018	100616	3000 D

Page Total \$ 42856-00

Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the same 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 16

Statement of Contributions Received

- Prescribed by Secretary of State 03/05

Name of Committee in Fall ALLGHBOLHEDDS FOR DATE	ent Lands		
Fall Name of Countinuor ALCADES	CP > PUIDES	Registration Number, if PA	vc.
Street Address 630 FLAZA DR + 600	Employer/Occupation/Lebor Organismion*		Ferran (Cost, Check, etc.)
HIEHLANDS RANCH	CD 80126	150616	AZEOUTH W
Full Name of Contributor RECHARD LAPEDES & Manee 2	Lywest	Registration Number, if PA	
BO WS LINESTONE ST	Employer/Occumum/Lekor Organization		Forms (Cosh, Oleck, etc.) CHECK
YELLOW SPRENES	8 Zap Code 0 H 43387	00/6/6	Amount 500 .
Foll Name of Constitutor GROLEP LZC		Regionation Number, if PA	
Sweet Address 124 15 THERD 55 # 400	Sapleyer/Occupains/Loker Organization*		Ferm (Chili, Check, etc.) CHECK
DATTON	0 H 45402	10/6/6	JOOK 5
THE ENGENERING LL	-	Registration Number, if P/	
Street Address 531 E 3 ND 5	Employer/Occupation/Labor Organization	h • •	Form (Cash, Clerk, etc.)
City DATTON Full bloom of Countries	800c Zip Code US 402	101616	1000-00
LEARN TO EARN		. Regulated Names, a P	
4801 SPRINGFORD ST	Employed/Occursions/Lebor Organization		Ferm (Cash, Osok, esc.)
DAYTON	0 4 45431	10/6/6	1000
Full Nerse of Contributor Full Ce 15 When an 2 Carriers Street Address	ve Coron :	Registration Number, if P	
1348 REDONNHOOR DE	ampayor congruence organization		Form (Cash, Dresk, esc.)
BEADENCREEK	Sinhe Zip Code 8 4 45434	18/8/6	500 D.
Full Name of Contributor		Regimenton Number, if Pr	AC
Street Address	Employer/Occupation/Laker Organization		Ferm (Cash, Chank, esc.)
City	State Zin Code	MDY	Amount
Full Name of Contributor		Registration Number, if P.	
Street Address	Employer/Occapation/Labor Organization		Ferra (Cash, Chuck, etc.)
City	Same Zip Cade	M D Y	Ament

Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is solf-employed, the occupation and the same 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)]



Prescribed by Secretary of State 03/05

Nome of Committee in Full WEIGH BORHOODS FOR DAYTO	is France		
Fall Name of Centributer .	·	Registration Number, if PA	C
Street Address	Employer/Occupation/Labor Organization		Form (Cash, Chack, etc.)
347 PARK DR	Stelle Zip Code	(M D Y	ANEDOT
DAYTON	0 H 45410	081616	5.00
JOHN SCOTT		Registration Number, if PA	.c
Street Address	Employer/Occupation/Leber Organization		Form (Cosh, Clack, etc.)
5440 N DIVIE DR	Stelle Zip Code	MPT	AMOUNT AMOUNT
DAYTON	0 1 45414	OBV 6/6	20010
JOHEN KASPER			
6397 ENERALD PARKWAY	Employed/Occupation/Lakor Organization		Form (Cash, Check, etc.) ANS DOT
City	D 1-1 43016	Magay	200,00
DUBLEN Full Names of Contributor	0 14 73016	Registration Number, if PA	
LARRY TAYLOR			Form (Coth, Olnek, etc.)
1020 W NATIONAL RD	Employer/Occuration/Lakor Organization		ANEDOT .
City VALOPLIA	O H 45377	08/8/6	200000
· · · · · · · · · · · · · · · · · · ·		Registration Number, if P/	ıc
CHARLES STMMS Street Address	Employer/Occupation/Lebur Organization		Ferna (Cash, Check, etc.)
2785 DRCHARD RUN RO	Stelle Zip Code	IV KALIMI	APEDOT
DAYTON	0 4 45949	082916	25000
Full Number of Contributor MICHAEL EMOFF Street Address		Registration Number, if B	AC .
	Employer/Occupation/Labor Organisation		Form (Cash, Classic, esc.)
P. D. Box 36	State Zip Code	MIDIY	ADEDOT
DAYTON Full Name of Contributor	OH 45401	0830/6	
CHASLES SEMMS Street Address			
	Employer/Occupation/Lebor Organization		Frem (Cosh, Omok, etc.) A NE DO T
City.	0 H 45479	M D Y	4500.00
DASTEN Full Name of Contributor	0 4 45449	Registration Number, if P	
JOHN STAFFORD	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
1340 SPANGLER RD			AVEDOT.
City FAZRBORN	Same Zin Code O H 45324	0831/6	2500°

Page Total 1/3, RTL

Required for contributions from judividuals 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)]



Prescribed by Secretary of State 03/03

Name of Committee in Full	Darmes France		
NOTCHBORHOODS FOR		Registration Number, 1f P	VC .
MATTHEW KLEMPNESS	Employer/Occupation/Leber Organization		Ferra (Cnal, Check, etc.)
125 BODNER.			AUCDOT
DATTED	Saho Zip Code OH 45410	0210	1.00
Pull Neuro of Centributor		Registertion Number, if Pa	LC .
Stroot Address STEEL	Employer/Occupation/Labor Organization		Form (Cost, Cleck, etc.)
Cay RASKENGTON PL	Stelpo Zip Code	M DIY	ANGUOT
Dayrop	04 45419	090216	25.00
Pall Name of Countibutor ALPDREW RODNEY Street Address		Registration Number, if P.	AC
	Employer/Occuments/Labor Organization		Form (Cash, Cleack, etc.
199 LANGEL DAY DR	Seeles Zip Cede	MIDIN	ALEDOT
DRATON	OH 45459	090414	25-00
NEAL GI TILEMAN Street Address		Registration Number, if P	AC
Saust August	Employen/Occannies/Leber Organismon		Ferm (Cosh, Orack, etc.
217 RUSPLOW RD	Stello Zip Ceds:	MINIM	ACCOUNT OF
TATPOLI Full Name of Completor	0 14 45409	References Number of J	100
THUA BUSTILLO			
LOT B WATERULEET AU City	Employen/Occapation/Labor Organization		Perm (Cash, Osak, esc. R-NUFDET
	Santo Zip Codo O H 45420	M D Y	3500° D
Pull Nesso of Contributor	0 4 45420	Registration Number, if	AC .
PETER HORLEY Street Address			Posse (Cash, Chank, etc.
108 McDopagett ST	Employer/Occupation/Later Organisation*		ADEDOT
DAYFON	OH 45402	090816	1500°
Full Name of Contributor		Regissition Number, if P	
DOB TART	Employer/Occupation/Lokor Organization		Ferm (Cash, Oscik, etc.
2933 Lower BELIBROOK		1 2 1 2 1 2	ANEDOT
SPASOG VALLEY	OH 45370	090816	100
Full Name of Contributor		Registence Number, if I	
CHRES WERE	Employer/Occupation/Labor Organization		From (Crob, Orack, etc.
SALDE FERST ST	Strius Zip Code	M In Iv	ANEDOT
DAYTEN	0 H 45402	09/3/6	1000

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 19

Page Total \$ 77

Prescribed by Segretary of State 03/05

Name of Committee in Fell	i r	• ,	
PETCHENDICOS FOR DAYSE	AND FUNDED	Registration Number, if P	AC .
SANDERA GUDORF	7"		
324 THELMA ADE.	Employer/Occupation/Lobor Organization		Form (Cash, Clasck, etc.)
City	Sales Zip Code 245.445	MDY	AMEDOT Amount 200
Pull Nesse of Centrisseer	10/4/4940	Registration Number, if P.	AC AC
KELLY ST CLAFE			Form (Cost, Check, etc.)
3600 PERMENAL DR	Employen/Occupation/Leber Organization*	:	ASCROT
VANDALEA	Steho Zip Code OH 45377	MECHIC	Soo co
Fall Name of Canadanar	T G H	Registration Number, if P.	
DL APHSTRONG - FOSTER	Employer/Occupation/Lakor Organization*		Form (Cash, Disck, etc.)
168E BEECHOOD AO			AVETOT
DATTON	State Zip Code O H 45405	09 23 16	Amount 250 July
Full Name of Contributor		Registration Number, if P	AC .
PETER HAGER	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
Street Address 155 RAVELLE CT City	Stelle 17th Code	IM IN IV	ANEDOT
DA-TTO IO Full Nume of Contributor	State Zip Code O H 433420	092616	500,00
Full Name of Contributor CRAWFRAD HOYENG Street Address		Registration Number, if I	AC .
Street Address	Employen Occupation Lakor Organization		Form (Cash, Orock, etc.)
555 HEMOPLN # 600	State Zip Code	M D Y.	AUSTOT
DABLIN	8 4 43017	101416	50000
BREAN HEITKAMP		Indiametra termet'n	AC .
STROOM Address 947 WESTFRENSTER PL	Employer/Occupation/Labor Organization		Form (Cash, Clank, etc.)
City	8 H 45419	MINIM	ADEDOT
DAYYON Full Name of Contributor	0 H 45419	Registration Humber, if P	
STEVE BUTT			
PO 10063	Employer/Occapation/Labor Organization		Perso (Cash, Ossok, esc.) ANG DOT
City.	0 H 4540Z	MINIT	400 0
Full Name of Commission		Registration Number, if P	700 AC
Street Address			Form (Coph, Clerck, etc.)
•	Employer/Occupation/Labor Organization	•	
City	Sante Zip Code	M D Y	46298

Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the same 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)]



Prescribed by Secretary of State 2/01

Name of Committee in Full					
NETGHBORHOOD! FE	of Day	TONS FUTURE			
L JR Custom STRATGGTES			05 1716 11957.50		
Address	Purpose				
2257 MARASS ST	Po	LLING			
City	State	Zip Code	Check Number		
NEW ORIEARS	24	70177			
To Whom Paid			0 8 0 4 6 2500.00		
C-3 GROUP	Purpose		0 0 17 6 23 80		
232 E 6 35	T diposo				
City	State	Zip Code	Check Number		
DATTON	DH	45102	1584		
To Whom Paid CODE			OS 17 16 20 0		
Address	Purpose				
355 MOBUNEUT		TRE FEE			
City	State	Zip Code	Check Number		
DAYTON To Whom Paid	OH	45402	M I D I V Amount		
			082316 188		
LIBGOLD STERRIE INC	Purpose		08 27 18 100		
Address 315 E, FERST ST City		Form ST	DRALE		
City	State	Zip Code	Check Number		
To Whom Paid	0 0	45402	1585		
To Whom Paid			M D Y Amount		
DATTON BAKEIN SHEE			090616 80.56		
Address	Purpose		Para		
1203 BROWN 50	REIM	Zepsenspr Zip Code	ACK ROBERTS		
City	OH		Check Number		
To Whom Paid	UH	45409	M D Y Amount		
			090616 65.56		
DAYRO BAYEL Address	Purpose				
1200 BROWN 50	KEINE	Zip Code	CK KOBGETS		
City	State	Zip Code	Check Number		
To Whom Paid	DA	45409			
To Whom Paid POLT TECH Address			08 2516 2800' Amount		
Address 1525 CANYON LEDGE G CONSULT ± U6 City State Zip Code Check Number					
City	State	Zip Code	Check Number		
LAS VEGES	PV	89117	1586		
To Whom Paid			082516 1700		
Address	Purpose		0023/6/100		
Address 9914 CULZUAN DR# 1805	PROGRAM MGT				
City	State	Zip Code	Check Number		
DATTON	OH	45426	150(

/93/1.42 Page Total \$____



Prescribed by Secretary of State 2/01

Name of Committee in Full					
MATCHBORHOODS FOR DASTONS FLOTORES					
RUST BELT STRATECTES			OF 2516	Amount 5400	
2128 SAMBER RD	Purpose Par Car	Zip Code	ss Joseph		
Colonos	State OH	Zip Code 43220	Check Number		
TO Whom Paid SPAND GO FOR OKIO			082512	1750° ®	
25E BOARDMAN 5THUS	Purpose PROGR	ans Mor			
Yourstown	OH State	Zip Code 44503	Check Number 1589		
To Whom Paid Superson Paratreax Address			090816	134.42	
LOIZA N'DEVIE DR	ENVEZ	PRES			
Dayrow .	State	Zip Code 45414	Check Number		
TO Whom Paid 50ARX SPACE CREAT.	TUE		0824/6	Amount 4830 ' 33	
6935 PETER PX	Purpose		·		
DATEON	State	Zip Code 45412	Check Number		
Superazon Prawizo6 Address			082716	Amount 431 . 15	
LOIZA D. DIRIE DR	Purpose RETURN	ENVELOPE	3		
DAMEN	State	Zip Code 45414	Cbeck Number		
C 3 GROUSE			0906/6	Amount 2500	
To Whom Paid C 3 GROUSE Address 232 = 67# ST	Purpose (SE)	DEVELOPMEN	5		
DAYTON	State	Zip Code 45402	Check Number 1596		
To Whom Paid Res 355 Joseph 1			090606	Amount 470 al	
Address 443 & 6 14 ST Purpose REINGUASENCEUS					
Deron	State	Zip Code 47402	Check Number		
To Whom Paid USPO			091316	329° 00	
1111 E 57H ST	Purpose Post				
D AYTON	State	Zip Code 45401	Check Number		

15,021,90 Page Total

Page 3

Prescribed by Secretary of State 2/01

Name of Committee in Full		~		
NEIGHBORHOUDS FOR D	A970WS	+ UTURE		
To Whom Paid U.5PD	09/5/16	90, 24		
36 N LIEDLEW ST	Purpose Pos	STAGE		
DAYTON DAYTON	State	Zip Code	Check Number	
			M D Y	Amount
Community Bible 517	RATEGIE	5	09/5/6	5000.00
112 S WATER ST #8	Co	DS4LTING		
	State	Zip Code	Check Number	
To Whom Paid	8#	4 4240	1588	Amount
ADRIAN MCLEMORE Address			09/6/6	100°00
	Purpose	-14		
5974 CILZEAN	CONS	Zip Code	Check Number	
DATTON	011	45426	1552	
To Whom Paid	UH	10123		Amount
PATRIOT SEGNAGE	Purpose		09/6/6	817.48
1001 SECOND AUE	ST6			
DASTON	K Y	Zip Code 41074	Check Number	
To Whom Paid			M D Y	Amount 2000 . SO
BURGES & BURGES STREET	TEGIE	'3	109/6/6	20 000
26100 LAKE SHORE	Purpose Co A	SULTERS		
City	State	Zip Code	Check Number	
CLEVE LAND	OH	44/32	1558	
To Whom Paid AQ 5PO			092016	1.48
36 N Luphon A	Purpose	y GRAY RE	INBURY HEN	7
City DAYTON To Whom Paid	State	Zip Code 45 402	Check Number	
	DH	7070-	M D Y	Amount 406 00
AIRWAVE Z	Duman		09 2016	706
4 5 MAIN ST KERY GRAY REINBURSE				
DASTON	State	Zip Code 45402	Check Number 1553	
To Whom Paid U 5 PD M D Y Amount O 9 20 1 6 41.00				
36 N Ludeon ST	Purpose	Ly GODY P	ETMB	
City DAYTOP.	State D71	Zip Code 45402	Check Number	
			- IV	

28062,20

Page 4

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full NETCHBORHOODS F	or Da	GOODS FUTH	RG			
TO Whom Paid ADRIAN Belenok	E		M D Y D Y 23/6	Amount 1700 · as		
Address 5974 (GLZEAN	Purpose	MGA IZIN Code				
DAYTON	State O H	Zip Code 45426	Check Number			
To Whom Paid Ohio Oncavezence	CAMP	4762	09 Z6 16	Amount 3400° a		
25 E. BOARTORAN # 428	Cons	OCTIVE				
YEARSTONN	State	Zip Code 44503	Check Number			
To Whom Paid US PO Address	Purpose		92616	Amount 94-00		
IIII & 5781 St	State	Zip Code	Check Number			
Darrow To Whom Paid	OH	45401	1566	Amount		
PANERA BREAD	Purpose		092616	15.99		
BROOM ST	Volc	Zip Code	Check Number			
To Whom Paid	0 4	43409	/567 M D Y	Amount		
Address WIFELE WIRELE	Purpose		199 219 16	Amount 396 - 83		
City Dans WAZN	State	Zip Code	Check Number			
To Whom Paid	ON	45463	MDY	Amount 20		
Address Address	Purpose	GRAY RE	092911			
City DAYTEN SI	State 19 (+	Zip Code 45402	Check Number			
To Whom Paid DAYSON WAACP	17 17		M D Y	Amount 200°		
Address 1528 W THIRD ST HOVERIFZENG						
DASTEN	State 191H	Zip Code 4 5 4 02	Check Number			
Burkes & Burkes			1001 1E	Amount (S)		
Address 26/06 LAKE SHORE	Purpose Cow:	SULTING				
City CLIFFE LAND	State 19	Zip Code 44/3 2	Check Number			

Page Total \$ 14085.02

Page 5

Prescribed by Secretary of State 2/01

Name of Committee in Full			
NETCHAOR 4000S FOR D	AYTONS	LUSURE	
SAARZ SAACE CREATI			100716 18445.27
LAGIST PETERS PK	Purpose	ITEN6	
DAPTON	State	45414	Check Number
Ources & Burkes			100316 1000°
26106 LAKE SHORE	Purpose CONS	EULTEDG -	
CLEVELANS	State: OH	Zip Code 44/3 Z	Cleck Number 1572
TO Whom Paid SPARE SPACE CREAT	IVE		10 03 16 9873 -97
L935 PETERS PR	Purpose	NTING .	
DAYTON DAYTON	State OH	Zip Code 45414	Check Namber
TO WHOM PAID SPARY SPACE CREATED	E		100516 10409 FZ
Address 6985 PETERS	BINT	TUS	
DATTON	Strate OH	Zip Code 454)4	Check Namber
BURLES & BURLES			1005/6 2955 524
26/00 LARE SHORE	Purpose	7465	
CLEVELAND	OH ,	Zip Code	Check Number
TO WHOM PAID SULLERZOR PRINTING	6		100716123.69
6012 A N DIXXE JO	Purpose	VELDPEL	
DAYTOZ	State: OH	Zip Code 45414	Check Number
To Whom Paid August 3 3 Dune ES Address			10 1016 8637.82
2LIDO LARE SHORE	Purpose	TAGE	
CLEVELAND	State	Zip Code 4413 Z	Check Number 1569
To Whom Paid Karack LLC Address			10 13 16 525 8
42 WFETH ST	Putpose	20	
DAYTON	State	Zip Code 45402	Check Number

60 367,69 Page Total

Page 6

Prescribed by Secretary of State 2/01

Name of Commutate in Full			1
DETHORAGETS FOR DA	mas F	TURES	
To Whom Paid			M D Y Amount
PATRIOT SIGNAGE			1017/66981.75
Address	Purpose		
1001 200 AVE	STEN		
DATTON	SINCE KY	Zip Code 4/874	Check Number
To Whom Paid.	1 -9		M. J.D. Y. Amount
POLITECA		·	NOV 7 16 Z800
Address 1500 - 1000 - 1	Purpose		
1525 CANYON LEDGE		Zip Code	
LAS VECAS	MANU	Zip Code 89177	Check Number
To Whom Paid		10111	M D Y Amount
COMMENTY BOOK ST	RA I		1/0/7/6/5000
Address	Luxbose		
112 5 WASTER SI	CONS	WOTENG .	
City	OH	Zip Code	Check Number
REST	011	49240	1012
BullES & BarkES			1017168402,73
24100 LAKE SHORE	Purpose	GE 3 CARDS	,
City	VOSIA	Code . CARDS	
CLEVELAND	OH	44/32	Check Number
To Whom Paid			10/8/6 90000
BREES BORKES	Parmore		10 / 8/ 6 9000
26100 LAKE SHORE	ME	OFF Brey	
City	OH Same	Zip Code 44/32	Check Number
To Warm Paid	I OH,	44/32	1015
ANG/E MASTAGNI	MATHEW	35	10 19 16 107 45-28
Address 5 8 7 15 <1	Purpose		
SOTN Sylvania	-	Te: e :	
FORT WORTH	Store	Zip Code 76/11	Check Number
To Whom Paid		1-111	
ADRIAN MCLEMORE			10/9/6/700
3974 CRUZEAN	Purpose C. On 14	MUTILB	
City	State	Zip Code	Check Number
DAYFOL	OH.	45420	1017
THE NEW MODIA FIRM	TNC		101916350000
1730 RHOBE I SLAND AN NW	Purpose MEDIA	0.00	UT-DEGLETALADS
City .	State	Zip Code	Check Number
WASHINGTON	DE DC	20036	WIRE

19629,76 Page Total 31-E R.C. 3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date	9/28/16
Page	

Sta te OH ployer/Occupan Sta te	Zip Code ### 387 tion/Labor Organization* Zip Code ### 35 40 2- tion/Labor Organization*	Form (Cash, Check, etc.) CHECK Registration Number, if PAC M D Y Amount O 9 2 7 1 2 500 Form (Cash, Check, etc.) CHECK Registration Number, if PAC
Sta te O H oloyer/Occupat Sta te O I H	Zip Code #3387 tion/Labor Organization* Zip Code 45 40 2	Form (Cash, Check, etc.) CHECK Registration Number, if PAC M D Y Amount 500 Form (Cash, Check, etc.) CHECK
Sta te	ion/Labor Organization* Zip Code 45 40 2	Form (Cash, Check, etc.) CHECK Registration Number, if PAC M D Y Amount 500 Form (Cash, Check, etc.) CHECK
Sta te	Zip Code 45 40 Z	Registration Number, if PAC M D Y Amount 500 Form (Cash, Check, etc.)
Sta te	Zip Code 45 40 Z	Porm (Cash, Check, etc.) CHECK
Sta te	Zip Code 45 40 Z	Porm (Cash, Check, etc.) CHECK
O H	45402	CHECK
oloyer/Occupa		
	tion/Labor Organization*	Registration Number, if PAC
	tion/Labor Organization*	
Sta te		M D Y Amount
Sta te		092816 5000
011	Zip Code	Form (Cash, Check, etc.)
e14	43206	Registration Number, if PAC
		Registration Number, if FAC
oloyer/Occupa	tion/Labor Organization*	M D Y Amount
		0928 16 250
	Zip Code	Form (Cash, Check, etc.)
OH)	70011	Registration Number, if PAC
oloyer/Occupa	tion/Labor Organization*	M D Y Amount
		09 28 16 25000
Sta te	Zip Code	Form (Cash, Check, etc.)
0 41	4350)	Registration Number, if PAC
		Nograndor Namou, ii i i i
ployer/Occupa	tion/Labor Organization*	M D Y Amount
		09 2816 200 10
Sta te		Form (Cash, Check, etc.)
OF.	73 90 2	Registration Number, if PAC
3		
ployer/Occupa	tion/Labor Organization*	M D Y Amount
r	17: 0-1	Form (Cash, Check, etc.)
State		Form (cash, check, etc.)
2 7	embly candidates. If contribu	CHILLE .
	Sta te OH ployer/Occupa Sta te ployer/Occupa	ployer/Occupation/Labor Organization* Sta te Zip Code 45557 Ployer/Occupation/Labor Organization* Sta te Zip Code 45 40 7 Sta te Zip Code 45 40 7

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

	FUTURE		Registration Number, if PAC
CARL HOUDERSON			
et Address	Employer/Occupation	on/Labor Organization*	M D Y Amount 200, 20
SDY LARGHTREE	0.1	In C.	
h-m l	State	45424	Form (Cash, Check, etc.)
Name of Contributor	1/1	13757	Registration Number, if PAC
CHRISTOPHER ROBERTS			
et Address	Employer/Occupation	on/Labor Organization*	M D Y Amount
2938 DWIGHT			972817 100
Do :- :	State	Zip Code	Form (Cash, Check, etc.)
Name of Contributor	021	47450	Registration Number, if PAC
KAREN SETTI			Registration Number, it are
n Address	Employer/Occamati	on/Labor Organization*	M D Y Amount
589 GADDER RD 3			092886 120. W
1	State te	Zip Code	Form (Cash, Check, etc.)
ATTON	DH	45424	about
Name of Contributor			Registration Number, if PAC
ELARY ROSS BROWN PR			M D Y Amount
2 BLADIONS 51	Employer/Occupan	ion/Labor Organization*	092316 100° 2
THE WAY	Sta te	Zip Code	Form (Cash, Check, etc.)
AVTON	04	25410	CHECK
Name of Contributor			Registration Number, if PAC
HEAST GOLKERU			
et Address	Employer/Occupat	non/Labor Organization* .	09 28 16 100 B
76 augustus (Smite	Zip Code	0923/4 /00 Form (Cash, Check, etc.)
DAVEZ	Def	453415	CAFELL
Name of Contributor		175 //	Registration Number, if PAC
WALD FALEY			
et Address Attach ALTHUR	Employer/Occupat	tion/Labor Organization*	M D Y AMOUNT DO
47 h 3/100 HE43A 201	Spalte	177 6 1	
The state of the s	SIM CE	Zip Code	Forth (Cash, Check, etc.)
) Am		1 () /	(1/13/6/1
24702	0 1)	4572:4	Registration Number, if PAC
Name of Contributor	0 1)	14724	
Name of Contributor Sieble Fox	Employer/Occupa	tion/Labor Organization*	Registration Number, if PAC
Name of Contributor	Employer/Occupa	tion/Labor Organization®	Registration Number, if PAC M D Amount 30
Name of Contributor Piesce F-BK et Address	Employer/Occups		Registration Number, if PAC

31-E R.C. 3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date			
Page	3		

treet Address 4) Stright ST Sity Ca Sumbus Full Name of Contributor	[F1		Registration Number, if PAC
CP Sum bus all Name of Contributor			M D V Amount
CP Sum bus all Name of Contributor	Enaphoyer/Occupan	ion/Labor Organization*	0 1 3 0 1 6 25B
all Name of Contributor	Sta te	Zip Code	Form (Cash, Check, etc.)
		10014	Registration Number, if PAC
DIANTE MAHLE			
et Address	Employer/Occupat	ion/Labor Organization*	M D Y Amount 09 2 8 / K 50 .
1237 Equorit			
	Sta te	Zip Code	Form (Cash, Check, etc.)
IN Same of Contributor	7,	TOTIO	Registration Number, if PAC
			resident contractions to the
FARRA CODY et Address 148 HANOVER	Employer/Occupat	ion/Labor Organization*	M D Y Amount SD
y	Sta te	Zip Code	Form (Cash, Check, etc.)
DAYTON	OH	45 217	CHECK
Name of Contributor NOSERT MUDDLY			Registration Number, if PAC
to ACRI MURRY cet Address	Employer/Occupat	ion/Labor Organization®	M D Y Amount
611 STISTER LEAT			092816 50°C
y/	Sta te	Zip Code	Form (Cash, Check, etc.)
MATTES	DH	45731	
Il Name of Contributor			Registration Number, if PAC
TWA MADELSTUZ 915 Survey VIEW	Employer/Occupat	ion/Labor Organization*	M D Y Amount
955 Surgerview			892816 SD. Vis
,	Sta te	Zip Code	Form (Cash, Check, etc.)
DUSTEN	DA	45406	CASUC
Name of Contributor			Registration Number, if PAC
eet Address	Employer/Occupat	ion/Labor Organization*	M D Y Amount
acon de mal lila			0928 H 50-00
CODO BELICIO	Sta te	Zip Code	Form (Cash, Check, etc.)
Dien (10 14	4542X	
BYTON	16 14		
DYTOV Il Name of Contributor	10 14		Registration Number, if PAC
DYTOV Il Name of Contributor		ion/Labor Oreanization*	
THE Address LEDO SELTON PL TO YTOY Il Name of Contributor MERGER H Waker cet Address 318 5 BK10mFTEID		ion/Labor Organization*	
Harage of Contributor Market Barrel Waker		ion/Labor Organization*	

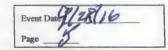
31-E R.C. 3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date		
Druit Dige		-
Page	41	

THE SHOPE Treet Address 2067 SPREND CREEP Site BELLGROOK Full Name of Contributor 51ECH AVST LOOK	Employer/Occupa					PAC
BELLB ROOK ull Name of Contributor	Employer/Occupa	ation/Labor Occanization*	M	T Di	I Y	Amount
DELLB ROOK			9	28	16	Amount 50
full Name of Contributor	Sta te	Zip Code 45 305	,	Cash, Che		
STERNANT / OOX	()	1000		ration Nu		PAC
DICTION COL						
reet Address	Employer/Occupa	ation/Labor Organization*	M	DE	72	Amount 55
to D Z ENKLE	Sta te	Zip Code	Form (Cash, Che	ck. etc.)	20
SPRINGFIRE	0 4	45502	C	15	_	
ull Name of Contributor			Registr	ration Nu	mber, if I	PAC
NANNETTE WHALL	=7		14		1 36	
217WROST PH	Employer/Occupa	ation/Labor Organization*	DG.	75	IK	Amount 25
ity	Sta te	Zip Code,	Form (Cash, Che	ck, etc.)	
MOUN	8H	Zip Code, 4540 B	-	(50)	_	
SHOWOW HILENES			Registr	ration Nu	mber, if I	PAC
treet Address	Employer/Occup	ation/Labor Organization*	M	D	Y	Amount
2677 MOJECAN AD			09	28	18	Amount
Dasi	Sta te	Zip Code	Form (Cash, Che	ck, etc.)	
full Name of Contributor	OH	40427	Pagist	ration Nu	mher if	PAC
	AFRE CA	58	Rogist	ration iva	inoci, ii i	ine
treet Address		ation/Labor Organization*	M	D	Y	Amount
			09	128	16	1449.00
ity	Sta te	Zip Code		Cash, Che	ck, etc.)	
			60	1 2 64		
II No. of Control of C				4SH	mber if	PAC
full Name of Contributor				ration Nu	mber, if	PAC
	Employer/Occup	ation/Labor Organization*			mber, if	PAC
treet Address			Regist	D D	Y	Amount
rreet Address	Employer/Occup	ation/Labor Organization* Zip Code	Regist	ration Nu	Y	Amount
reet Address			M Form (D D	Y eck, etc.)	Amount
reet Address ity ull Name of Contributor	Sta te	Zip Code	M Form (D Cash, Che	Y eck, etc.)	Amount
	Sta te		Regist M Form (Cash, Che	Y eck, etc.)	Amount

31-F R.C. 3517.10



Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

				_		
Name of Committee in Full NEELHS PRHOOFS FOR DAYT	nes Fu	TURE				
To Whom Paid			IM	D	Y	Amount
FATRWAY IND AT KITT	YHAWK		99 28 16 1236.53			
Name of Committee in Pull NEXCHSORHOODS FOR DAYT To Whom Paid FAFRWAY INN AT WITT Address 3383 CHUCK WASNER LN City DAYTON	Purpose FACT	DREUK				
City	State	Zin Code	Check ?	Number		
City Dayrow To Whom Paid	Q H	454/4		570		
To Whom Paid	- //	7077	M	D	Y	Amount
Address	Purpose				-	
City	State	Zip Code	Check 1	Number		
				1 6		
To Whom Paid			M	D	Y	Amount
Address	Purpose					
7400.535	l mpoor					
City	State	Zip Code	Check 1	Number		
To Whom Paid			M	D	Y	Amount
Address	Purpose					
City	State	Zip Code	Check	Number	_	
City	State	Zip Code	Check	4unioci		
To Whom Paid			M	D	Y	Amount
Address	Purpose				-	
City	State	Zip Code	Check	Number		
			- 1	I D	1 1/2	
To Whom Paid			M	D	*	Amount
Address	Purpose					L
11000	- apost					
City	State	Zip Code	Check	Number	-	
To Whom Paid			M	D	Y	Amount
	Te .		· ·			
Address	Purpose					
Ein.	Ctate	Zip Code	Check	Number		
City	State	Zip Code	Check	Number'		

Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

Page Total \$ /236 53