

## Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee <i>Friends of Gary Leitzell</i>				Registration Number, if PAC			
Full Name of Candidate <i>Gary Leitzell</i>							
Street Address <i>525 Heiss Ave</i>				Office Sought <i>Mayor</i>		District	
City <i>Dayton</i>				State <i>OH</i>		Zip Code <i>45403</i>	
Type of Report (place X in the left of report type)	Pre-Primary		Post-Primary		Pre-General		<input checked="" type="checkbox"/> Post-General
	July Monthly		August Monthly		September Monthly		Termination
Annual Year							
Semiannual							
Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No		Report Electronically Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date of Electronic Filing		M/D/Y <i>11/03/09</i>	

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box ☐ No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$	<i>4894</i>	<i>26</i>
2. Total monetary contributions (From Form No. 31-A)	\$	<i>2154</i>	
3. Total other income (From Form No. 31-A-2)	\$	<i>-</i>	
4. Total funds available (sum of lines 1, 2, 3)	\$	<i>7048</i>	<i>26</i>
5. Total monetary expenditures (From Form No. 31-B)	\$	<i>6810</i>	<i>09</i>
6. Balance on hand (from funds line 5)	\$	<i>238</i>	<i>17</i>
7. Value of funds and contributions received (From Form No. 31-C-1)	\$	<i>1302</i>	<i>54</i>
8. Value of funds and contributions made (From Form No. 31-C-2)	\$	<i>-</i>	
9. Outstanding loans owed by committee (From Form No. 31-D)	\$	<i>-</i>	
10. Outstanding debts owed by committee (From Form No. 31-E)	\$	<i>-</i>	
11. Outstanding loans owed to committee (From Form No. 31-F)	\$	<i>-</i>	
12. Value of in-kind expenditures made (From Form No. 31-F-1)	\$	<i>-</i>	
13. For Electronic Filing: Totals only Sum of lines 2, 7, and amount of any new loans received this period	\$		

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

*Daniel Kennedy, Treasurer*  
Print Name and Title (Treasurer and Deputy Treasurer only)

*Daniel Kennedy*  
Signature

*10 Dec 09*  
Date

Contribution  
pages *3*

Expenditure  
pages *3*

Other  
pages *1*

Total  
pages *8*

*including this page*

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Friends of Gary Litzell</i>													
Full Name of Contributor <i>Thomas Tanner</i>							Registration Number, if PAC						
Street Address <i>2238 E. River Rd.</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>CK 3518</i>						
City <i>Moraine</i>		State <i>OH</i>		Zip Code <i>45439</i>		M <i>10</i>		D <i>22</i>		Y <i>09</i>		Amount <i>\$150.00</i>	
Full Name of Contributor <i>Jacqueline Clendenon</i>							Registration Number, if PAC						
Street Address <i>2308 Mill Ave</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check 8485</i>						
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45420</i>		M <i>10</i>		D <i>23</i>		Y <i>09</i>		Amount <i>\$100.00</i>	
Full Name of Contributor <i>David McDonald</i>							Registration Number, if PAC						
Street Address <i>3706 Ridgeway</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check 1089</i>						
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45419</i>		M <i>10</i>		D <i>24</i>		Y <i>09</i>		Amount <i>\$100.00</i>	
Full Name of Contributor <i>Paul Daniel Lohmeyer</i>							Registration Number, if PAC						
Street Address <i>331 Spirea Dr.</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check 3744</i>						
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45419</i>		M <i>10</i>		D <i>20</i>		Y <i>09</i>		Amount <i>\$250.00</i>	
Full Name of Contributor <i>John Staten</i>							Registration Number, if PAC						
Street Address <i>1682 Ladera Trl</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check 1091</i>						
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45459</i>		M <i>10</i>		D <i>21</i>		Y <i>09</i>		Amount <i>\$100.00</i>	
Full Name of Contributor <i>Lawrence White</i>							Registration Number, if PAC						
Street Address <i>2533 Far Hills Ave</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>						
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45419</i>		M <i>10</i>		D <i>21</i>		Y <i>09</i>		Amount <i>\$100.00</i>	
Full Name of Contributor <i>John Hyer Jr.</i>							Registration Number, if PAC						
Street Address <i>1027 Holly Ave</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>						
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45410</i>		M <i>10</i>		D <i>24</i>		Y <i>09</i>		Amount <i>\$40.00</i>	
Full Name of Contributor <i>Kathleen Coley</i>							Registration Number, if PAC						
Street Address <i>430 E. 6th St.</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>check</i>						
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45402</i>		M <i>10</i>		D <i>24</i>		Y <i>09</i>		Amount <i>\$25.00</i>	

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

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>FRIENDS OF GARY LEITZELL</b>									
Full Name of Contributor <b>DOUGLAS DUGAN</b>							Registration Number, if PAC		
Street Address <b>4625 N. DIXIE DR</b>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DAYTON</b>		State <b>OH</b>		Zip Code <b>45414</b>		M   D   Y <b>10   24   09</b>		Amount <b>\$50</b>	
Full Name of Contributor <b>JUDITH MAGNUS</b>							Registration Number, if PAC		
Street Address <b>52 ANDERSON ST</b>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DAYTON</b>		State <b>OH</b>		Zip Code <b>45410</b>		M   D   Y <b>10   24   09</b>		Amount <b>\$350</b>	
Full Name of Contributor <b>NELLE TERRELL</b>							Registration Number, if PAC		
Street Address <b>731 MT. CLAIR AVE</b>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DAYTON</b>		State <b>OH</b>		Zip Code <b>45408</b>		M   D   Y <b>10   24   09</b>		Amount <b>\$50</b>	
Full Name of Contributor <b>TIM MCINTOSH</b>							Registration Number, if PAC		
Street Address <b>1375 SALEM AVE</b>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DAYTON</b>		State <b>OH</b>		Zip Code <b>45406</b>		M   D   Y <b>10   24   09</b>		Amount <b>\$100</b>	
Full Name of Contributor <b>LILLIAN GOODLOE</b>							Registration Number, if PAC		
Street Address <b>1230 MT. VERNON AVE</b>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DAYTON</b>		State <b>OH</b>		Zip Code <b>45405</b>		M   D   Y <b>10   24   09</b>		Amount <b>\$25</b>	
Full Name of Contributor <b>THOMAS DEHART</b>							Registration Number, if PAC		
Street Address <b>100 PATTERSON VILLAGE DR #2</b>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DAYTON</b>		State <b>OH</b>		Zip Code <b>45419</b>		M   D   Y <b>10   24   09</b>		Amount <b>\$20</b>	
Full Name of Contributor <b>PHYLLIS FELDMAN</b>							Registration Number, if PAC		
Street Address <b>1124 EPWORTH AVE</b>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DAYTON</b>		State <b>OH</b>		Zip Code <b>45410</b>		M   D   Y <b>11   12   09</b>		Amount <b>\$50</b>	
Full Name of Contributor <b>PATRICK ERNST</b>							Registration Number, if PAC		
Street Address <b>1121 CROYDEN DR</b>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>PAYPAL</b>		
City <b>DAYTON</b>		State <b>OH</b>		Zip Code <b>45420</b>		M   D   Y <b>10   24   09</b>		Amount <b>\$25</b>	

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Page Total \$ 670

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

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Name of Committee in Full <b>FRIENDS OF GARY LEITZELL</b>									
Full Name of Contributor <b>CONTRIBUTIONS OF \$25 OR LESS</b>							Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CASH</b>		
City			State	Zip Code	M	D	Y	Amount <b>300</b>	
Full Name of Contributor <b>CONTRIBUTIONS OF \$25 OR LESS</b>							Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CASH</b>		
City			State	Zip Code	M	D	Y	Amount <b>319</b>	
Full Name of Contributor							Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State	Zip Code	M	D	Y	Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State	Zip Code	M	D	Y	Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State	Zip Code	M	D	Y	Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State	Zip Code	M	D	Y	Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State	Zip Code	M	D	Y	Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State	Zip Code	M	D	Y	Amount	

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Page Total \$ 619

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 1

Name of Committee in Full <i>Friends of Garry Lutzell</i>							
To Whom Paid <i>Randd Associates</i>				M <i>11</i>	D <i>02</i>	Y <i>09</i>	Amount <i>349.89</i>
Address <i>4725 S. Kettering Blvd.</i>		Purpose <i>Post it Notes 3x4</i>					
City <i>Dayton OH</i>	State <i>OH</i>	Zip Code <i>45439</i>	Check Number <i>Debit card</i>				
To Whom Paid <del><i>Double Tree Hotel</i></del>				M <i>11</i>	D <i>02</i>	Y <i>09</i>	Amount
Address <del><i>11 S Ludlow St.</i></del>		Purpose <del><i>election night room</i></del>					
City <del><i>Dayton</i></del>	State <del><i>OH</i></del>	Zip Code <del><i>45402</i></del>	Check Number				
To Whom Paid <i>William Pace Company</i>				M <i>11</i>	D <i>02</i>	Y <i>09</i>	Amount <i>\$297.34</i>
Address <i>111 W. First St.</i>		Purpose <i>Fundraising &amp; expenses</i>					
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45402</i>	Check Number <i>1013</i>				
To Whom Paid <i>William Pace Company</i>				M <i>11</i>	D <i>02</i>	Y <i>09</i>	Amount <i>\$1230.14</i>
Address <i>111 W. First St.</i>		Purpose <i>advertising</i>					
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45402</i>	Check Number <i>1014</i>				
To Whom Paid <i>William Pace Company</i>				M <i>11</i>	D <i>02</i>	Y <i>09</i>	Amount <i>\$575.00</i>
Address <i>111 W. First St.</i>		Purpose <i>DWN inserts</i>					
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45402</i>	Check Number <i>1015</i>				
To Whom Paid <i>William Pace Company</i>				M <i>11</i>	D <i>02</i>	Y <i>09</i>	Amount <i>\$1000.00</i>
Address <i>111 W. First St.</i>		Purpose <i>Radio advertising</i>					
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45402</i>	Check Number <i>1016</i>				
To Whom Paid <i>William Pace Company</i>				M <i>11</i>	D <i>02</i>	Y <i>09</i>	Amount <i>\$1000.00</i>
Address <i>111 W. First St.</i>		Purpose <i>Radio advertising</i>					
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45402</i>	Check Number <i>1017</i>				
To Whom Paid <i>William Pace Company</i>				M <i>11</i>	D <i>02</i>	Y <i>09</i>	Amount <i>\$189.94</i>
Address <i>111 W. First St.</i>		Purpose <i>Fundraising</i>					
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45402</i>	Check Number <i>1018</i>				

# Statement of Expenditures

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Prescribed by Secretary of State 2/01

Name of Committee in Full <i>Friends of Gary Leitzell</i>									
To Whom Paid <i>William Pace Company</i>						M	D	Y	Amount
Address <i>111 W. First Street</i>						<i>10</i>	<i>29</i>	<i>09</i>	<i>\$500.00</i>
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45402</i>		Check Number <i>1019</i>			
To Whom Paid <i>William Pace Company</i>						M	D	Y	Amount
Address <i>111 W. First Street</i>						<i>10</i>	<i>29</i>	<i>09</i>	<i>\$52.35</i>
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45402</i>		Check Number <i>1020</i>			
To Whom Paid <i>William Pace Company</i>						M	D	Y	Amount
Address <i>111 W. First Street</i>						<i>11</i>	<i>01</i>	<i>09</i>	<i>\$400.00</i>
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45402</i>		Check Number <i>1021</i>			
To Whom Paid <i>William Pace Company</i>						M	D	Y	Amount
Address <i>111 W. First St.</i>						<i>11</i>	<i>02</i>	<i>09</i>	<i>\$56.94</i>
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45402</i>		Check Number <i>1022</i>			
To Whom Paid <i>Facebook Advertising 650-543-7818</i>						M	D	Y	Amount
Address						<i>10</i>	<i>22</i>	<i>09</i>	<i>\$21.00</i>
City		State <i>OH</i>		Zip Code <i>45402</i>		Check Number <i>debit</i>			
To Whom Paid <i>Northridge Sports Shop</i>						M	D	Y	Amount
Address <i>4618 N. Dixie</i>						<i>10</i>	<i>26</i>	<i>09</i>	<i>\$856.00</i>
City <i>Dayton</i>		State <i>OH</i>		Zip Code <i>45414</i>		Check Number <i>debit</i>			
To Whom Paid <i>Facebook Advertising 650-543-7818</i>						M	D	Y	Amount
Address						<i>10</i>	<i>29</i>	<i>09</i>	<i>\$21.00</i>
City		State <i>OH</i>		Zip Code <i>CA</i>		Check Number <i>debit</i>			
To Whom Paid <i>Facebook Advertising 650-543-7818</i>						M	D	Y	Amount
Address						<i>11</i>	<i>03</i>	<i>09</i>	<i>\$33.64</i>
City		State <i>OH</i>		Zip Code <i>CA</i>		Check Number			

Page Total *1940.93*

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Page 2

Name of Committee in Full <i>Friends of Gary Bertzell</i>					
To Whom Paid <i>Pizza Factory</i>		M <i>11</i>	D <i>03</i>	Y <i>09</i>	Amount <i>\$127.50</i>
Address <i>Wayne Ave</i>		Purpose <i>Pizza @ election night party</i>			
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45410</i>	Check Number <i>debit</i>		
To Whom Paid <i>Facebook Advertisizing</i>		M <i>11</i>	D <i>05</i>	Y <i>09</i>	Amount <i>\$30.00</i>
Address <i>650-543-7818</i>		Purpose <i>Mass email to facebook members</i>			
City	State <i>OH</i>	Zip Code	Check Number <i>debit</i>		
To Whom Paid <i>Doubletree</i>		M <i>11</i>	D <i>03</i>	Y <i>09</i>	Amount <i>\$68.32</i>
Address <i>11 S. Ludlow St.</i>		Purpose <i>Election night reception space</i>			
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45402</i>	Check Number <i>DEBIT</i>		
To Whom Paid <i>PAYPAL INC</i>		M <i>10</i>	D <i>24</i>	Y <i>09</i>	Amount <i>1.03</i>
Address		Purpose <i>FEE</i>			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		
To Whom Paid		M	D	Y	Amount
Address		Purpose			
City	State <i>OH</i>	Zip Code	Check Number		

# In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Friends of Gary Lertzell</i>			
Full Name of Contributor <i>Rand Associates</i>		Employer, Occupation, Labor Organization*	
Street Address <i>4725 S Kettering Blvd</i>		Description of Item or Service <i>Printing</i>	
City <i>Dayton</i>		State <i>OH</i>	Zip Code <i>45439</i>
		Registration Number, if PAC	
		M <i>1</i>	D <i>0</i>
		Y <i>2</i>	Fair Market Value <i>\$1000.00</i>
		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor <i>PRINT PRINT PRINTERS</i>		Employer, Occupation, Labor Organization*	
Street Address <i>150 S. PATTERSON BLVD</i>		Description of Item or Service <i>500 ENVELOPES &amp; LETTERS</i>	
City <i>DAYTON</i>		State <i>OH</i>	Zip Code <i>45402</i>
		Registration Number, if PAC	
		M <i>1</i>	D <i>0</i>
		Y <i>2</i>	Fair Market Value <i>302.54</i>
		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	

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1302.54  
Page Total \$ 1000