

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Full Name of Committee						Registration Number, if PAC						
<b>Joey D. Williams for Dayton City Commission</b>												
Full Name of Candidate												
<b>Joey D. Williams for Dayton City Commission</b>												
Street Address			Office Sought			District						
1229 Sunnyview Ave.			City Commissioner									
City						State	Zip Code					
Dayton						O	H	45406				
Type of Report (place X to the left of report type)	Pre-Primary	Post-Primary	Pre-General	X	Post-General		Annual Year					
	July Monthly	August Monthly	September Monthly		Termination		Semiannual					
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date of Election	M	D		Y	1	1	0	3	0	9

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 at 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	\$ 7,150.39
2. Total monetary contributions (From Form No. 31-A)	\$ 2,133.00
3. Total other income (From Form No. 31-A-2)	\$ 0.00
4. Total funds available (sum of lines 1, 2, 3)	\$ 9,283.39
5. Total monetary expenditures (From Form No. 31-B)	\$ 4,687.99
6. Balance on hand (line 4 minus line 5)	\$ 4,595.40
7. Value of in-kind contributions received (From Form No. 31-I-1)	\$
8. Value of in-kind contributions made (From Form No. 31-I-2)	\$
9. Outstanding loans owed by committee (From Form No. 31-C)	\$
10. Outstanding debts owed by committee (From Form No. 31-N)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	\$
12. Value of independent expenditures made (From Form No. 31-U)	\$
13. For Electronic Filing Entities only	\$
Sum of lines 2, 7 and amount of any new loans received this period	\$

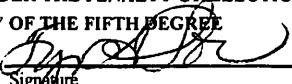
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THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER  
COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

Ty A. Stone, Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)



12/11/2009

Date

Contribution pages	4
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Expenditure pages	3
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Other pages	0
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Total pages	7
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## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Joey D. Williams for Dayton City Commission</b>		Registration Number, if PAC					
Full Name of Contributor <b>Alvarene Owens</b>		Form (Cash, Check, etc.) <b>Check</b>					
Street Address <b>1728 S. Main St.</b>	Employer/Occupation/Labor Organization* <b></b>			M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>100.00</b>
City <b>Dayton</b>	State <b>O</b>	Zip Code <b>45409</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>100.00</b>
Full Name of Contributor <b>Morris &amp; Alison Brown</b>		Registration Number, if PAC					
Street Address <b>1080 Deer Run Rd.</b>	Employer/Occupation/Labor Organization* <b></b>			M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Centerville</b>	State <b>O</b>	Zip Code <b>45459</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
Full Name of Contributor <b>Citizens for Blackshear</b>		Registration Number, if PAC					
Street Address <b>1116 Dennison Ave.</b>	Employer/Occupation/Labor Organization* <b></b>			M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>150.00</b>
City <b>Dayton</b>	State <b>O</b>	Zip Code <b>45408</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>150.00</b>
Full Name of Contributor <b>Julius Carter/M. Cooper</b>		Registration Number, if PAC					
Street Address <b>4001 Palos Verdes Ct.</b>	Employer/Occupation/Labor Organization* <b></b>			M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>250.00</b>
City <b>Trotwood</b>	State <b>O</b>	Zip Code <b>45426</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>250.00</b>
Full Name of Contributor <b>CR Washington CO L.P.A.</b>		Registration Number, if PAC					
Street Address <b>130 W 2nd St., Suite 1600</b>	Employer/Occupation/Labor Organization* <b></b>			M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>150.00</b>
City <b>Dayton</b>	State <b>O</b>	Zip Code <b>45402</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>150.00</b>
Full Name of Contributor <b>Judge Adele Riley</b>		Registration Number, if PAC					
Street Address <b>625 Ellsworth Dr.</b>	Employer/Occupation/Labor Organization* <b></b>			M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>50.00</b>
City <b>Dayton</b>	State <b>O</b>	Zip Code <b>45426</b>		M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>50.00</b>
Full Name of Contributor <b>Brian Inderrieden</b>		Registration Number, if PAC					
Street Address <b>33 Plumwood Rd.</b>	Employer/Occupation/Labor Organization* <b></b>			M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Dayton</b>	State <b>O</b>	Zip Code <b>45409</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
Full Name of Contributor <b>S.L. Porter</b>		Registration Number, if PAC					
Street Address <b>161 Copperfield Dr.</b>	Employer/Occupation/Labor Organization* <b></b>			M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>20.00</b>
City <b>Dayton</b>	State <b>O</b>	Zip Code <b>45415</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>20.00</b>

\* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 820.00

## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full		Registration Number, if PAC								
Joey D. Williams for Dayton City Commission										
Full Name of Contributor Jonas L. Smith		Form (Cash, Check, etc.) Check								
Street Address 173 Lexington Ave.	Employer/Occupation/Labor Organization*				M 1   0		D 1   4	Y 0   9	Amount 50.00	
City Dayton	State O   H	Zip Code 45402								
Full Name of Contributor Carl S. Henderson		Registration Number, if PAC								
Street Address 4509 Larch Tree Court	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Money Order					
City Dayton	State O   H	Zip Code 45424	M 1   0		D 0   9	Y 0   9	Amount 100.00			
Full Name of Contributor Mocha Readers		Registration Number, if PAC								
Street Address 893 S. Main St., #189	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Money Order					
City Englewood	State O   H	Zip Code 45322	M 1   0		D 1   2	Y 0   9	Amount 50.00			
Full Name of Contributor Derrick Forward		Registration Number, if PAC								
Street Address 4215 Breezewood Ave.	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Dayton	State O   H	Zip Code 45406	M 1   0		D 0   2	Y 0   9	Amount 20.00			
Full Name of Contributor Elizabeth Toney		Registration Number, if PAC								
Street Address 1831 Auburn Ave.	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Dayton	State O   H	Zip Code 45406	M 1   0		D 1   4	Y 0   9	Amount 50.00			
Full Name of Contributor Kenneth May		Registration Number, if PAC								
Street Address 165 Crossridge Dr.	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Kettering	State O   H	Zip Code 45429	M 1   0		D 1   5	Y 0   9	Amount 100.00			
Full Name of Contributor David McDonald		Registration Number, if PAC								
Street Address 3706 Ridgeway Rd.	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Dayton	State O   H	Zip Code 45419	M 1   0		D 1   4	Y 0   9	Amount 100.00			
Full Name of Contributor Sheila Taylor		Registration Number, if PAC								
Street Address 2818 Kenview Ave.	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Dayton	State O   H	Zip Code 45420	M 1   0		D 0   9	Y 0   9	Amount 25.00			

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# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Joey D. Williams for Dayton City Commission						
Full Name of Contributor			Registration Number, if PAC			
Guy Jones						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
5813 Trula Place						Check
City	State	Zip Code	M	D	Y	Amount
Dayton	O   H	45415	1   0	1   4	0   9	75.00
Full Name of Contributor			Registration Number, if PAC			
Jimmy Allen						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
4592 Toni Dr.						Check
City	State	Zip Code	M	D	Y	Amount
Dayton	O   H	45418	1   0	0   1	0   9	50.00
Full Name of Contributor			Registration Number, if PAC			
Cheryl Mason						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
4093 Twin Lakes Circle						Check
City	State	Zip Code	M	D	Y	Amount
Clayton	O   H	45315	1   0	0   5	0   9	20.00
Full Name of Contributor			Registration Number, if PAC			
Nellie Terrell						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
731 Mt. Clair Ave.						Check
City	State	Zip Code	M	D	Y	Amount
Dayton	O   H	45408	1   0	1   7	0   9	50.00
Full Name of Contributor			Registration Number, if PAC			
Thomas Lovett						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
555 Rubicon Rd.						Check
City	State	Zip Code	M	D	Y	Amount
Dayton	O   H	45419	1   0	3   0	0   9	200.00
Full Name of Contributor			Registration Number, if PAC			
Laura Lansdown						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
7375 Dayton Farmersville Rd.						Check
City	State	Zip Code	M	D	Y	Amount
Dayton	O   H	45418	1   1	0   1	0   9	50.00
Full Name of Contributor			Registration Number, if PAC			
Barbara Pressley						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
2632 England Ave.						Check
City	State	Zip Code	M	D	Y	Amount
Dayton	O   H	45406	1   1	0   2	0   9	25.00
Full Name of Contributor			Registration Number, if PAC			
Ted Durig						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
10608 Chestnuthill Lane						Check
City	State	Zip Code	M	D	Y	Amount
Centerville	O   H	45458	1   1	0   2	0   9	200.00

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Page Total \$ 670.00

## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Joey D. Williams for Dayton City Commission</b>					
Full Name of Contributor <b>The Trade Winds Club</b>			Registration Number, if PAC		
Street Address <b>2604 Churchland Ave.</b>		Employer/Occupation/Labor Organization* <b></b>			Form (Cash, Check, etc.) <b>Check</b>
City <b>Dayton</b>		State <b>O   H</b>	Zip Code <b>45406</b>	M   D   Y <b>1   1   0   7   0   9</b>	Amount <b>128.00</b>
Full Name of Contributor <b>Theodore Fields</b>			Registration Number, if PAC		
Street Address <b>5770 Courtney Lane</b>		Employer/Occupation/Labor Organization* <b></b>			Form (Cash, Check, etc.) <b>Check</b>
City <b>Clayton</b>		State <b>O   H</b>	Zip Code <b>45315</b>	M   D   Y <b>1   1   0   2   0   9</b>	Amount <b>20.00</b>
Full Name of Contributor			Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization* <b></b>			Form (Cash, Check, etc.)
City		State <b>     </b>	Zip Code <b>     </b>	M   D   Y <b>        </b>	Amount
Full Name of Contributor			Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization* <b></b>			Form (Cash, Check, etc.)
City		State <b>     </b>	Zip Code <b>     </b>	M   D   Y <b>        </b>	Amount
Full Name of Contributor			Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization* <b></b>			Form (Cash, Check, etc.)
City		State <b>     </b>	Zip Code <b>     </b>	M   D   Y <b>        </b>	Amount
Full Name of Contributor			Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization* <b></b>			Form (Cash, Check, etc.)
City		State <b>     </b>	Zip Code <b>     </b>	M   D   Y <b>        </b>	Amount
Full Name of Contributor			Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization* <b></b>			Form (Cash, Check, etc.)
City		State <b>     </b>	Zip Code <b>     </b>	M   D   Y <b>        </b>	Amount
Full Name of Contributor			Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization* <b></b>			Form (Cash, Check, etc.)
City		State <b>     </b>	Zip Code <b>     </b>	M   D   Y <b>        </b>	Amount

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

Page Total \$ 148.00

## Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Joey D. Williams for Dayton City Commission							
To Whom Paid				M	D	Y	Amount
Montgomery County Democratic Party				1 0	1 5	0 9	2,500.00
Address	Purpose						
131 S. Wilkinson	Democratic Donation						
City	State	Zip Code	Check Number				
Dayton	O   H	45402	173				
To Whom Paid			M	D	Y	Amount	
Corpus Christi				1 0	1 4	0 9	60.00
Address	Purpose						
527 Forest Ave.	Ad						
City	State	Zip Code	Check Number				
Dayton	O   H	45405	171				
To Whom Paid			M	D	Y	Amount	
Mount Tabor Church				1 0	2 0	0 9	50.00
Address	Purpose						
330 Home Avenue	Donation						
City	State	Zip Code	Check Number				
Dayton	O   H	45417	174				
To Whom Paid			M	D	Y	Amount	
Dayton Area CAP				1 0	1 3	0 9	100.00
Address	Purpose						
1543 Alwildy Ave.	Sponsor						
City	State	Zip Code	Check Number				
Dayton	O   H	45408	172				
To Whom Paid			M	D	Y	Amount	
Sawicki & Son				1 0	1 2	0 9	670.00
Address	Purpose						
1521 W. Lafayette Blvd.	Signs						
City	State	Zip Code	Check Number				
Detroit	M   I		170				
To Whom Paid			M	D	Y	Amount	
Mount Moriah				1 0	3 1	0 9	50.00
Address	Purpose						
301 Mia Ave.	Donation						
City	State	Zip Code	Check Number				
Dayton	O   H	45427	265				
To Whom Paid			M	D	Y	Amount	
Nationals Inc.				1 0	3 0	0 9	25.00
Address	Purpose						
1951 Shenago Valley Freeway, Suite 2	Teen Beauty Pageant Ad						
City	State	Zip Code	Check Number				
Hermitage	P   A	16148	2945				
To Whom Paid			M	D	Y	Amount	
Joe Lacey				1 0	3 0	0 9	50.00
Address	Purpose						
161 Huffman Ave.	Contribution						
City	State	Zip Code	Check Number				
Dayton	O   H	45403	118				

Page Total \$ 3,505.00

## Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full				
<b>Joey D. Williams for Dayton City Commission</b>				
To Whom Paid <b>Michaels of Dayton</b>			M    D    Y	Amount
Address <b>40 N. Main St</b>	Purpose <b>Appreciation dinner</b>		1   1   1   3   0   9	<b>467.00</b>
City <b>Dayton</b>	State <b>O   H</b>	Zip Code <b>45402</b>	Check Number <b>135</b>	
To Whom Paid <b>Fawn Williams</b>			M    D    Y	Amount
Address <b>4319 Philadelphia Dr.</b>	Purpose <b>Postage (reimbursement)</b>		1   1   1   3   0   9	<b>31.04</b>
City <b>Dayton</b>	State <b>O   H</b>	Zip Code <b>45405</b>	Check Number <b>132</b>	
To Whom Paid <b>Dayton NAACP</b>			M    D    Y	Amount
Address <b>1528 Dr. Martin Luther King Jr. Way</b>	Purpose <b>Ad</b>		1   1   1   3   0   9	<b>200.00</b>
City <b>Dayton</b>	State <b>O   H</b>	Zip Code <b>45402</b>	Check Number <b>133</b>	
To Whom Paid <b>Delta Sigma Theta Sorority Inc.</b>			M    D    Y	Amount
Address <b>P.O. Box 2316</b>	Purpose <b>Ad</b>		1   1   1   3   0   9	<b>80.00</b>
City <b>Dayton</b>	State <b>O   H</b>	Zip Code <b>45401</b>	Check Number <b>134</b>	
To Whom Paid <b>ATT</b>			M    D    Y	Amount
Address <b>P.O. Box 8100</b>	Purpose <b>telephone</b>		1   1   0   4   0   9	<b>14.95</b>
City <b>Aurora</b>	State <b>I   L</b>	Zip Code <b>60507</b>	Check Number <b>EFT</b>	
To Whom Paid <b>Djuna Brown Jennings</b>			M    D    Y	Amount
Address <b>4813 Northgate Court</b>	Purpose <b>Volunteer Gift</b>		1   1   1   2   0   9	<b>30.00</b>
City <b>Trotwood</b>	State <b>O   H</b>	Zip Code <b>45416</b>	Check Number <b>N/A</b>	
To Whom Paid <b>Doug Dempsey</b>			M    D    Y	Amount
Address <b>24 North Westview Ave.</b>	Purpose <b>Volunteer Gift</b>		1   1   1   2   0   9	<b>30.00</b>
City <b>Dayton</b>	State <b>O   H</b>	Zip Code <b>45403</b>	Check Number <b>N/A</b>	
To Whom Paid <b>Scott Ervin</b>			M    D    Y	Amount
Address <b>110 Jones St.</b>	Purpose <b>Volunteer Gift</b>		1   1   1   2   0   9	<b>30.00</b>
City <b>Dayton</b>	State <b>O   H</b>	Zip Code <b>45410</b>	Check Number <b>N/A</b>	

## Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Joey D. Williams for Dayton City Commission			
To Whom Paid Richard Kidd		M D Y	Amount
Address 24 Macy St.	Purpose Volunteer gift	1 1 1 2 0 9	30.00
City Dayton	State O H Zip Code 45415	Check Number N/A	
To Whom Paid Fawn Williams		M D Y	Amount
Address 4319 Philadelphia Dr.	Purpose Volunteer gift	1 1 1 2 0 9	30.00
City Dayton	State O H Zip Code 45405	Check Number N/A	
To Whom Paid Ty Stone		M D Y	Amount
Address 2 Deshler Place	Purpose Volunteer gift	1 1 1 2 0 9	90.00
City Dayton	State O H Zip Code 45405	Check Number N/A	
To Whom Paid Brandon Whitehorn		M D Y	Amount
Address 500 East Third St. #534	Purpose Volunteer gift	1 1 1 2 0 9	30.00
City Dayton	State O H Zip Code 45402	Check Number 134	
To Whom Paid Troy Singer		M D Y	Amount
Address 715 Superior Ave.	Purpose Volunteer gift	1 1 1 2 4 0 9	30.00
City Dayton	State O H Zip Code 45402	Check Number N/A	
To Whom Paid Millie Smith		M D Y	Amount
Address 700 Torrance Place	Purpose Volunteer gift	1 1 1 2 0 9	30.00
City Dayton	State O H Zip Code 45406	Check Number N/A	
To Whom Paid Monica McGee		M D Y	Amount
Address 4134 Pompton Court	Purpose Volunteer gift	1 1 1 2 0 9	30.00
City Dayton	State O H Zip Code 45405	Check Number N/A	
To Whom Paid Michael Colvin		M D Y	Amount
Address 520 Crawley Run #205	Purpose Volunteer gift	1 1 1 2 0 9	30.00
City Centerville	State O H Zip Code 45458	Check Number N/A	