

Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

Reset Form

Full Name of Committee AJ Wagner for Mayor Committee				Registration Number, if PAC			
Full Name of Candidate AJ Wagner							
Street Address 7 Stonemill				Office Sought Mayor		District	
City Dayton				State OH		Zip Code 45409	
Type of Report (place X to the left of report type)	☒ Pre-Primary	☐ Post-Primary	☐ Pre-General	☐ Post-General	☐ Annual Year		
	☐ July Monthly	☐ August Monthly	☐ September Monthly	☐ Termination	☐ Semiannual		
Amended Report? ☐ Yes ☒ No		Report Electronically Filed? ☐ Yes ☒ No		Date of Election		1 ^M 1 ^D 0 ^Y 5 1 3	

For Candidates only, during an election year, if total contributions and expenditures each total \$550 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 conditions apply. See R.C. 3577.10(11) for details.

1. Amount brought forward from last report	\$	50,127.61
2. Total monetary contributions (From Form No. 31-A)	\$	23,400.00
3. Total other income (From Form No. 31-A-2)	\$	1,422.83
4. Total funds available (sum of lines 1, 2, 3)	\$	74,950.44
5. Total monetary expenditures (From Form No. 31-B)	\$	40,020.09
6. Balance on hand (line 4 minus line 5)	\$	34,930.35
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	0.00
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	0.00
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	10,000.00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	0.00
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	0.00
12. Value of independent expenditures made (From Form No. 31-U)	\$	0.00
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, WHICHEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIRST DEGREE.

Michael J. Bennett, Treasurer

Michael J Bennett

04/25/2013

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

Contribution
pages 13

Expenditure
pages 7

Other
pages 2

Total
pages 22

Print Form

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee							
Full Name of Contributor J. Joseph Walsh				Registration Number, if PAC			
Street Address 201 E. 6th St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 45402	M 0	D 2	Y 2	Amount \$200.00	
Full Name of Contributor Stuart A. Rose				Registration Number, if PAC			
Street Address 2875 Needmore Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 45414	M 0	D 2	Y 2	Amount \$1,000.00	
Full Name of Contributor Colleen Ryan				Registration Number, if PAC			
Street Address 53 Green St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal		
City Dayton	State OH	Zip Code 45402	M 0	D 3	Y 0	Amount \$500.00	
Full Name of Contributor Jacob Schierloh				Registration Number, if PAC			
Street Address 1238 Ashland Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Dayton	State OH	Zip Code 45420	M 0	D 3	Y 1	Amount \$50.00	
Full Name of Contributor Stephen Avakian				Registration Number, if PAC			
Street Address PO Box 25		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hull	State MA	Zip Code 02045	M 0	D 3	Y 1	Amount \$250.00	
Full Name of Contributor Guy E. Jones				Registration Number, if PAC			
Street Address 5813 Trula Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 45414	M 0	D 3	Y 1	Amount 90.00	
Full Name of Contributor Guy E. Jones				Registration Number, if PAC			
Street Address 5813 Trula Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 45414	M 0	D 3	Y 1	Amount \$100.00	
Full Name of Contributor William H Krul II				Registration Number, if PAC			
Street Address 4345 Trails End Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Kettering	State OH	Zip Code 45429	M 0	D 3	Y 2	Amount \$1,500.00	

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

Michael J Bonnett

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Page Total \$3,690.00

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee						
Full Name of Contributor William J. Leibold				Registration Number, if PAC		
Street Address 7 Springhouse Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45408	M 0	D 3	Y 2	Amount \$500.00
Full Name of Contributor Richard L. Henry				Registration Number, if PAC		
Street Address 11405 Lower Valley Pk		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Medway	State OH	Zip Code 45341	M 0	D 3	Y 2	Amount \$1,000.00
Full Name of Contributor Jill Hamilton				Registration Number, if PAC		
Street Address 1219 Harvard Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal	
City Dayton	State OH	Zip Code 45408	M 0	D 4	Y 0	Amount \$100.00
Full Name of Contributor Shelley Groh				Registration Number, if PAC		
Street Address 11 Perth Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal	
City Wilmington	State DE	Zip Code 19803	M 0	D 4	Y 0	Amount \$100.00
Full Name of Contributor Guy E. Jones				Registration Number, if PAC		
Street Address 5813 Trula Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45415	M 0	D 3	Y 2	Amount \$400.00
Full Name of Contributor Monica M. Snow				Registration Number, if PAC		
Street Address 68 Green St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45402	M 0	D 3	Y 2	Amount \$500.00
Full Name of Contributor Charles F. Horn				Registration Number, if PAC		
Street Address 5374 Brainard Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Kettering	State OH	Zip Code 45440	M 0	D 3	Y 2	Amount \$100.00
Full Name of Contributor Thomas Whelley				Registration Number, if PAC		
Street Address 10 N. Ludlow		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45402	M 0	D 4	Y 0	Amount \$500.00

* Required for contributions from individuals over \$100 in 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)]

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Page Total \$3,200.00

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee						
Full Name of Contributor Mary An Kross				Registration Number, if PAC		
Street Address 420 Shadowlawn Ave.		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 4 419	M 0	D 4	Y 0 9 1 3	Amount \$50.00
Full Name of Contributor Anthony A. Riggs				Registration Number, if PAC		
Street Address 2100 Liberty Ellerton Rd.		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 45418	M 0	D 4	Y 0 9 1 3	Amount \$5,000.00
Full Name of Contributor Sharon Radelet				Registration Number, if PAC		
Street Address 517 Shadowlawn Ave.		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 45418	M 0	D 4	Y 0 9 1 3	Amount \$200.00
Full Name of Contributor Sharon Radelet				Registration Number, if PAC		
Street Address 517 Shadowlawn Ave.		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 45418	M 0	D 4	Y 0 9 1 3	Amount \$100.00
Full Name of Contributor Deborah Feldman				Registration Number, if PAC		
Street Address 3601 Wood Hollow Rd.		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 45429	M 0	D 4	Y 1 9 1 3	Amount \$250.00
Full Name of Contributor Ronald Burdge				Registration Number, if PAC		
Street Address 6035 Mad River Rd.		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Paypal		
City Dayton	State OH	Zip Code 45459	M 0	D 4	Y 1 5 1 3	Amount \$100.00
Full Name of Contributor Brian Lehman				Registration Number, if PAC		
Street Address 3426 16th Street NW #T3		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Paypal		
City Washington	State DC	Zip Code 20010	M 0	D 4	Y 1 5 1 3	Amount \$100.00
Full Name of Contributor Dixie J. Allen				Registration Number, if PAC		
Street Address 4592 Toni Dr.		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
City Dayton	State OH	Zip Code 45417	M 0	D 4	Y 2 1 1 3	Amount \$60.

* 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)]

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Page Total \$5,850.00

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee						
Full Name of Contributor GladyGunn				Registration Number, if PAC		
Street Address 4237 Catalpha DR.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45405	M 0	D 4	Y 2 1 1 3	Amount \$50.00
Full Name of Contributor Jimmy Allen				Registration Number, if PAC		
Street Address 4592 Toni Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45417	M 0	D 4	Y 2 1 1 3	Amount \$50.00
Full Name of Contributor Laurie Quill				Registration Number, if PAC		
Street Address 432 Winding Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45429	M 0	D 4	Y 2 1 1 3	Amount \$150.00
Full Name of Contributor Joan Knoli				Registration Number, if PAC		
Street Address 3900 Dorsett Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45405	M 0	D 4	Y 2 1 1 3	Amount \$250.00
Full Name of Contributor Beverly Smith				Registration Number, if PAC		
Street Address 6731 Oak Field Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45415	M 0	D 4	Y 2 1 1 3	Amount \$200.00
Full Name of Contributor Mary Ellington				Registration Number, if PAC		
Street Address 39 Horace St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dayton	State OH	Zip Code 45402	M 0	D 4	Y 2 1 1 3	Amount \$100.00
Full Name of Contributor Contributions from form No. 31-E				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State OH	Zip Code	M 0	D 3	Y 2 7 1 3	Amount \$4,260.00
Full Name of Contributor Contributions from form No. 31-E				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State OH	Zip Code	M 0	D 4	Y 1 1 1 3	Amount \$5,600.00

* Required for contributions from individuals over \$100 to state wide and general assembly candidates. If contributor is self-employed, the registration and the name of the individual's business, if any, neither the 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))

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Print Form

Page Total \$10,660.00

Statement of Other Income

Prescribed by Secretary of State 2/01

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Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee					
Full Name Dayton Peace Museum			Registration Number, if PAC		
Address 208 W. Monument Ave.	Type* RE		M 0	D 4	Y 2
City Dayton	State OH	Zip Code 45402	Form (Cash, Check, etc.) Check		Amount \$1,422.83
Full Name			Registration Number, if PAC		
Address			M D Y		
City			Form (Cash, Check, etc.)		
Full Name			Registration Number, if PAC		
Address			M D Y		
City			Form (Cash, Check, etc.)		
Full Name			Registration Number, if PAC		
Address			M D Y		
City			Form (Cash, Check, etc.)		
Full Name			Registration Number, if PAC		
Address			M D Y		
City			Form (Cash, Check, etc.)		
Full Name			Registration Number, if PAC		
Address			M D Y		
City			Form (Cash, Check, etc.)		
Full Name			Registration Number, if PAC		
Address			M D Y		
City			Form (Cash, Check, etc.)		
Full Name			Registration Number, if PAC		
Address			M D Y		
City			Form (Cash, Check, etc.)		
Full Name			Registration Number, if PAC		
Address			M D Y		
City			Form (Cash, Check, etc.)		

* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received: RE for a refund, unashed check or the committee's own insufficient funds check received, RN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.

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1,422.83

Page Total \$

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Statement of Expenditures

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Name of Committee in Full AJ Wagner for Mayor Committee						
To Whom Paid EMC Research			M 0 2	D 0 1	Y 3	Amount 3900
Address 4041 North High St. Suite 300-M		Purpose Poll conducted on 1/28/13				
City Columbus	State	Zip Code 43214	Check Number 1215			
To Whom Paid Triumph Communication			M 0 2	D 0 9	Y 1 3	Amount 7500
Address 1480 Dublin Rd.		Purpose Fundraising and Consulting Services				
City Columbus	State	Zip Code 43215	Check Number 1216			
To Whom Paid Dayton Peace Museum			M 0 2	D 0 9	Y 1 3	Amount 1422.83
Address 208 W. Monument Ave.		Purpose Repayment for signs for MLK March (later reimbursed to c				
City Dayton	State	Zip Code 45402	Check Number 1217			
To Whom Paid Southern Christian Leadership Conference (SCLC)			M 0 2	D 0 9	Y 1 3	Amount 100.00
Address 2131 Dr. Martin Luther King Way		Purpose Ad placement in program booklet				
City Dayton	State	Zip Code 45417	Check Number 1218			
To Whom Paid University of Dayton School of Law			M 0 2	D 1 2	Y 1 3	Amount 40.00
Address Keller Hall, Mailbox #308, 300 College		Purpose 2013 Joseph Cinque Award Banquet				
City Dayton	State	Zip Code 45469	Check Number 1219			
To Whom Paid Dayton Weekly			M 0 2	D 1 2	Y 1 3	Amount 180.00
Address 118 Salem Ave.		Purpose 1/8 page ad in newspaper				
City Dayton	State	Zip Code 45406	Check Number 1220			
To Whom Paid Field Resource Management			M 0 2	D 1 3	Y 1 3	Amount 2062.50
Address 2242 Atlee Ct.		Purpose Field Organizing Services (1/2 payment)				
City Columbus	State	Zip Code 43220	Check Number 1221			
To Whom Paid VOID			M	D	Y	Amount
Address		Purpose				
City	State	Zip Code	Check Number 1223			

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Page Total **15205.33****15205.33**

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Statement of Expenditures

Prescribed by Secretary of State 2/01

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Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee									
To Whom Paid Jack and Jill of America, Inc.						M 0	D 2	Y 1	Amount 50.00
Address 1208 Hook Estate Dr.		Purpose 1/2 page ad for Trotwood							
City Dayton	State	Zip Code 45405	Check Number 1222						
To Whom Paid VOID						M	D	Y	Amount
Address		Purpose							
City	State	Zip Code	Check Number 1224						
To Whom Paid Field Resource Management						M 0	D 3	Y 0	Amount 2062.50
Address 2242 Atlee Ct.		Purpose Field Organizing Resources (second 1/2 of payment)							
City Columbus	State	Zip Code 43220	Check Number 1225						
To Whom Paid Paypal						M 0	D 3	Y 0	Amount 14.80
Address PO Box 45950		Purpose Fee for donation from Colleen Ryan							
City Omaha	State NB	Zip Code 68145	Check Number Paypal						
To Whom Paid Triumph Communications						M 0	D 3	Y 1	Amount 1500.00
Address 1480 Dublin Rd.		Purpose Consulting							
City Columbus	State	Zip Code 43215	Check Number 1226						
To Whom Paid Graphic Technologies						M 0	D 3	Y 1	Amount 1081.17
Address 532 Main St.		Purpose Labels, Letterhead, Envelopes and T-Shirts							
City Groveport	State	Zip Code 43125	Check Number 1227						
To Whom Paid Joan Wagner						M 0	D 3	Y 1	Amount 226.45
Address 7 Stonemill Rd.		Purpose Reimbursement for Hawthorn Grill							
City Dayton	State	Zip Code 45409	Check Number 1228						
To Whom Paid Joan Wagner						M 0	D 3	Y 1	Amount 85.42
Address 7 Stonemill Rd.		Purpose Reimbursement for Franco's Ristorante							
City Dayton	State	Zip Code 45409	Check Number 1229						

Michael J Bennett

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Page Total **5020.34**

Statement of Expenditures

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Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee							
To Whom Paid Joan Wagner				M	D	Y	Amount
				0	3	1 1 1 3	\$116.62
Address 7 Stonemill Rd.		Purpose Reimbursement for FedEx					
City Dayton	State OH	Zip Code 45409	Check Number 1230				
To Whom Paid Joan Wagner				M	D	Y	Amount
				0	3	1 1 1 3	\$93.60
Address 7 Stonemill Rd.		Purpose Reimbursement for Wright Brothers Post Office					
City Dayton	State OH	Zip Code 45409	Check Number 1231				
To Whom Paid Joan Wagner				M	D	Y	Amount
				0	3	1 1 1 3	\$45.64
Address 7 Stonemill Rd.		Purpose Reimbursement for FedEx					
City Dayton	State OH	Zip Code 45409	Check Number 1232				
To Whom Paid Joan Wagner				M	D	Y	Amount
				0	3	1 1 1 3	\$121.41
Address 7 Stonemill Rd.		Purpose Reimbursement for Staples					
City Dayton	State OH	Zip Code 45409	Check Number 1233				
To Whom Paid Joan Wagner				M	D	Y	Amount
				0	3	1 1 1 3	\$341.35
Address 7 Stonemill Rd.		Purpose Reimbursement for Racquet Club					
City Dayton	State OH	Zip Code 45409	Check Number 1234				
To Whom Paid Joan Wagner				M	D	Y	Amount
				0	3	1 1 1 3	\$2,002.58
Address 7 Stonemill Rd.		Purpose Reimbursement for PCS Marketing Group					
City Dayton	State OH	Zip Code 45409	Check Number 1235				
To Whom Paid Joan Wagner				M	D	Y	Amount
				0	3	1 5 1 3	\$45.00
Address 7 Stonemill Rd.		Purpose Reimbursement for Petitions					
City Dayton	State OH	Zip Code 45409	Check Number 1236				
To Whom Paid Joan Wagner				M	D	Y	Amount
				0	3	1 5 1 3	\$443.57
Address 7 Stonemill Rd.		Purpose Reimbursement for Superior Printing and Design					
City Dayton	State OH	Zip Code 45409	Check Number 1237				

Michael J Bennett

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Page Total **\$3,209.77**

Statement of Expenditures

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Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee				
To Whom Paid VOID	M	D	Y	Amount
Address		Purpose		
City		State	Zip Code	Check Number
		OH		1238
To Whom Paid Joan Wagner	M	D	Y	Amount
	0	3	1 5	1 3 \$96.30
Address 7 Stonemill Rd.		Purpose Reimbursement for Superior Printing and Design		
City Dayton		State OH	Zip Code 45409	Check Number 1239
To Whom Paid Joan Wagner	M	D	Y	Amount
	0	3	1 5	1 3 \$27.24
Address 7 Stonemill Rd.		Purpose Reimbursement for Payment to City of Dayton		
City Dayton		State OH	Zip Code 45409	Check Number 1240
To Whom Paid Joan Wagner	M	D	Y	Amount
	0	3	1 5	1 3 \$59.00
Address 7 Stonemill Rd.		Purpose Reimbursement for NAO (Dayton Area Realtors Board)		
City Dayton		State OH	Zip Code 45409	Check Number 1241
To Whom Paid Wayman Sons of Allen	M	D	Y	Amount
	0	3	1 5	1 3 \$132.00
Address 3317 Hoover Ave.		Purpose Dinner Tickets		
City Dayton		State OH	Zip Code 45402	Check Number 1241
To Whom Paid Mary Scott Nursing Center	M	D	Y	Amount
	0	3	2 1	1 3 \$220.00
Address 3109 Campus Dr.		Purpose Legacy Award Dinner		
City Dayton		State OH	Zip Code 45406	Check Number 1243
To Whom Paid Bab Mackley	M	D	Y	Amount
	0	3	2 1	1 3 \$60.00
Address 560 Parkway Dr.		Purpose Photography Shoot		
City St. Mary's		State OH	Zip Code 45885	Check Number 1244
To Whom Paid Paypal	M	D	Y	Amount
	0	4	0 2	1 3 \$3.20
Address PO Box 45950		Purpose Fee for donation from Jill Hamilton		
City Omaha		State NE	Zip Code 68145	Check Number Paypal

Michael J Bennett

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Page Total **\$597.74**

Statement of Expenditures

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Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee							
To Whom Paid Paypal				M	D	Y	Amount \$3.20
Address PO Box 45950				Purpose Fee for donation from Shelley Groh			
City Omaha		State NE	Zip Code 68145	Check Number Paypal			
To Whom Paid USPS				M	D	Y	Amount \$110.40
Address 1 Oakwood Ave.				Purpose Postage			
City Dayton		State OH	Zip Code 45409	Check Number CheckCard			
To Whom Paid Key Ads				M	D	Y	Amount \$4,550.00
Address 50 E. Third Street				Purpose Billboard Advertising			
City Dayton		State OH	Zip Code 45402	Check Number 1245			
To Whom Paid Tom Schiebenberger				M	D	Y	Amount \$100.00
Address 230 Xenia Ave.				Purpose Photographs			
City Dayton		State OH	Zip Code 45410	Check Number 1246			
To Whom Paid Paypal				M	D	Y	Amount \$3.20
Address PO Box 45950				Purpose Fee for donation from Ronald Burdge			
City Omaha		State NE	Zip Code 68145	Check Number Paypal			
To Whom Paid Paypal				M	D	Y	Amount \$3.20
Address PO Box 45950				Purpose Fee for donation from Brian Lehman			
City Omaha		State NE	Zip Code 68145	Check Number Paypal			
To Whom Paid Superior Printing and Office Supply				M	D	Y	Amount \$371.29
Address 6012 N. Dixie Dr.				Purpose Printing			
City Dayton		State OH	Zip Code 45414	Check Number CheckCard			
To Whom Paid HotCards				M	D	Y	Amount \$325.05
Address 27 E. 5th Ave.				Purpose Printing and Transportation of Materials			
City Columbus		State OH	Zip Code 43201	Check Number 325.05			

Michael J Bennett

Print Form

Page Total \$5,466.34

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Statement of Expenditures

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Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee							
To Whom Paid HotCards				M 0	D 4	Y 1713	Amount 256.20
Address 27 E. 5th Ave.		Purpose Printing and Transportation of Materials					
City Columbus	State	Zip Code 43201	Check Number CheckCard				
To Whom Paid Triumph Communications				M 0	D 4	Y 1713	Amount 10,010.00
Address 1480 Dublin Rd.		Purpose Media Placement					
City Columbus	State	Zip Code 43215	Check Number Direct Wire				
To Whom Paid Wright Patt Credit Union				M 0	D 4	Y 1713	Amount 20.00
Address 2455 Executive Park Blvd. PO Box 286		Purpose Fee for wire transfer of payment to Triumph Communicati					
City Fairborn	State	Zip Code 45324	Check Number Direct Wire				
To Whom Paid USPS				M 0	D 4	Y 1913	Amount 92.00
Address 36 N. Ludlow		Purpose Postage					
City Dayton	State	Zip Code 45402	Check Number CheckCard				
To Whom Paid USPS				M 0	D 4	Y 1913	Amount 138.00
Address 1 Oakwood Ave.		Purpose Postage					
City Dayton	State	Zip Code 45409	Check Number CheckCard				
To Whom Paid Expenditures from Form 31-F				M	D	Y	Amount 4.37
Address		Purpose					
City	State	Zip Code	Check Number				
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State	Zip Code	Check Number				
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State	Zip Code	Check Number				

Michael J Bennett

Print Form

Page Total **10520.51**

10520.51

Statement of Loans Received

Prescribed by Secretary of State 3/05

Reset Form

Full Name of Committee AJ Wagner for Mayor Committee										
From Whom Received Zafar Rizvi						Prior Amount \$10,000.00		Amt. Incurred this Period \$0.00		
Address 2196 Kershner Rd.								Outstanding Balance \$10,000.00		
City Dayton	State OH	Zip Code 45414	Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred M D Y 0 1 2 8 1 3			M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC			M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*			M	D	Y		M	D	Y	

From Whom Received Michael F. Oberer						Prior Amount \$10,000.00		Amt. Incurred this Period \$0.00		
Address 9824 Creek Bend Way								Outstanding Balance FORGIVEN		
City Dayton	State OH	Zip Code 45456	Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred M D Y 0 1 3 0 1 3			M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC			M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*			M	D	Y		M	D	Y	

From Whom Received						Prior Amount		Amt. Incurred this Period		
Address								Outstanding Balance		
City	State OH	Zip Code	Loans Received This Period Date Amount				Payments This Period Date Amount			
Date Loan was originally Incurred M D Y			M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC			M	D	Y		M	D	Y	
Employer/Occupation/Labor Organization*			M	D	Y		M	D	Y	

* 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)]

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 31-A-2). Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Outstanding Balance to the Cover page (Form No. 30-A).

¹ Total prior amount \$ **\$20,000.00**

² Total received this period \$ **\$0.00** (To Form No. 31-A-2)

³ Total payments this period \$ **\$0.00** (To Form No. 31-B)

⁴ Total Outstanding Balance \$ **\$10,000.00** (To Form No. 30-A)

Michael J Bennett

Print Form

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full			
AJ Wagner for Mayor Committee			
Full Name of Contributor		Registration Number, if PAC	
Ronald Burdge			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
6035 Mad River Rd.		0 3 2 7 1 3	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dayton	OH	45459	Paypal
Full Name of Contributor		Registration Number, if PAC	
Beth Habbegar			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
344 Nassau St.		0 3 2 7 1 3	\$30.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dayton	OH	45410	Paypal
Full Name of Contributor		Registration Number, if PAC	
Charles Slicer III			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
111 W 1st St, Suite 205		0 4 0 9 1 3	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dayton	OH	45402	Check
Full Name of Contributor		Registration Number, if PAC	
Dwight Washington			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
3666 Judy Lane		0 4 0 9 1 3	\$200.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dayton	OH	45405	Check
Full Name of Contributor		Registration Number, if PAC	
Joseph Ebenger			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
8981 Treeland Lane		0 4 0 9 1 3	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dayton	OH	45458	Check
Full Name of Contributor		Registration Number, if PAC	
Charles Grove III			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
636 W. Circle Dr.		0 4 0 9 1 3	\$100.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dayton	OH	45403	Check
Full Name of Contributor		Registration Number, if PAC	
Marvin Merritt			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
427 Alameda Place		0 4 0 9 1 3	\$250.00
City	State	Zip Code	Form (Cash, Check, etc.)
Dayton	OH	45406	Check

* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event

\$4,260.00

Total expenditures this event

\$4.37

Michael J Bennett

Page Total \$ 880.00

Print Form

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/09

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee				
Full Name of Contributor Steven Dankof, Sr.			Registration Number, if PAC	
Street Address Suite 1500 Ketterling Tower	Employer/Occupation/Labor Organization*		M D Y 0 4 0 9 1 3	Amount \$100.00
City Dayton	State OH	Zip Code 45423	Form (Cash, Check, etc.) Check	
Full Name of Contributor Rosemary Evans			Registration Number, if PAC	
Street Address 2009 Harvard Blvd.	Employer/Occupation/Labor Organization*		M D Y 0 4 0 9 1 3	Amount \$100.00
City Dayton	State OH	Zip Code 45406	Form (Cash, Check, etc.) Check	
Full Name of Contributor Ashley Kessler			Registration Number, if PAC	
Street Address 1800 Lincoln Ave.	Employer/Occupation/Labor Organization*		M D Y 0 4 0 9 1 3	Amount \$75.00
City Latrobe	State PA	Zip Code 15650	Form (Cash, Check, etc.) Check	
Full Name of Contributor James Connell			Registration Number, if PAC	
Street Address 342 Wonderly Ave.	Employer/Occupation/Labor Organization*		M D Y 0 4 0 9 1 3	Amount \$100.00
City Dayton	State OH	Zip Code 45419	Form (Cash, Check, etc.) Check	
Full Name of Contributor Robert Putnam			Registration Number, if PAC	
Street Address 6561 Stilcrest Way	Employer/Occupation/Labor Organization*		M D Y 0 4 0 9 1 3	Amount \$500.00
City Dayton	State OH	Zip Code 45414	Form (Cash, Check, etc.) Check	
Full Name of Contributor Tonya Oberer			Registration Number, if PAC	
Street Address 9824 Creek Bend Way	Employer/Occupation/Labor Organization*		M D Y 0 4 0 9 1 3	Amount \$100.00
City Dayton	State OH	Zip Code 45458	Form (Cash, Check, etc.) Check	
Full Name of Contributor Diane Labrie			Registration Number, if PAC	
Street Address 3171 Southdale Dr. Apt 2	Employer/Occupation/Labor Organization*		M D Y 0 4 0 9 1 3	Amount \$75.00
City Dayton	State OH	Zip Code 45409	Form (Cash, Check, etc.) Check	

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event

\$4,260.00

Total expenditures this event

\$4.37

Michael J Bennett

Page Total \$ **\$1,050.00**

PrintForm

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee				
Full Name of Contributor William Frapwell			Registration Number, if PAC	
Street Address 400 Hathaway Rd.	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45419	Y 1	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Gregory Scott			Registration Number, if PAC	
Street Address 34 Plumwood Ave.	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45409	Y 1	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Felicite D. Lilly			Registration Number, if PAC	
Street Address 3117 Bulah Ave.	Employer/Occupation/Labor Organization*		M 0	D 4
City Kettering	State OH	Zip Code 45429	Y 1	Amount \$25.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Sherri Peterson			Registration Number, if PAC	
Street Address 2913 Revele Ave.	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45420	Y 1	Amount \$40.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Nadine Ballard			Registration Number, if PAC	
Street Address 65 Wythe Parish	Employer/Occupation/Labor Organization*		M 0	D 4
City Centerville	State OH	Zip Code 45459	Y 1	Amount \$150.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Charles Rowland II			Registration Number, if PAC	
Street Address 2190 Gateway Dr.	Employer/Occupation/Labor Organization*		M 0	D 4
City Fairborn	State OH	Zip Code 45324	Y 1	Amount \$200.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Charles Allberry II			Registration Number, if PAC	
Street Address 3905 S. Valleybrook Dr.	Employer/Occupation/Labor Organization*		M 0	D 4
City Englewood	State OH	Zip Code 45322	Y 1	Amount \$100.00
Form (Cash, Check, etc.) Check				

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Fill in the boxes below only on the last page for this event.

Transfer the total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions form for No. 31-E" and list the date of the event in the date column.

Total contributions this event

\$4,260.00

Total expenditures this event.

\$4.37

Michael J Bennett

Page Total \$

\$715.00

Print Form

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee				
Full Name of Contributor Nedra Smolka			Registration Number, if PAC	
Street Address 3171 Southdale Dr. Apt 2	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45409	Y 1	Amount \$75.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor John Smalley			Registration Number, if PAC	
Street Address 131 North Ludlow Suite 1400	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45402	Y 1	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Mark Babb			Registration Number, if PAC	
Street Address 2190 Gateway Dr.	Employer/Occupation/Labor Organization*		M 0	D 4
City Fairborn	State OH	Zip Code 45324	Y 1	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Jose Quinones			Registration Number, if PAC	
Street Address 28 Enid Ave.	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45429	Y 1	Amount \$500.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Marvin Merritt			Registration Number, if PAC	
Street Address 427 Alameda Place	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45406	Y 1	Amount \$250.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Danny Hamilton			Registration Number, if PAC	
Street Address 918 Ashcreek Dr.	Employer/Occupation/Labor Organization*		M 0	D 4
City Centerville	State OH	Zip Code 45458	Y 1	Amount \$50.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Isabel Suarez			Registration Number, if PAC	
Street Address 765 Troy St.	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45404	Y 1	Amount \$100.00
Form (Cash, Check, etc.) MoneyGram				

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event

\$4,260.00

Total expenditures this event

\$4.37

Print Form

*Michael J Bennett*Page Total \$ **\$1,175.00**

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee				
Full Name of Contributor Robert Dunlevey, Jr.			Registration Number, if PAC	
Street Address 1317 Raleigh Rd.	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45419	Y 0	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Thomas Schiff			Registration Number, if PAC	
Street Address 500 Lincoln Park Blvd. Suite 216	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45429	Y 0	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Thomas Baggott			Registration Number, if PAC	
Street Address 130 W. 2nd St. Suite 2103	Employer/Occupation/Labor Organization* Baggott Law Office, LLC		M 0	D 4
City Dayton	State OH	Zip Code 45402	Y 0	Amount \$100.00
Form (Cash, Check, etc.) Check				
Full Name of Contributor Jacob Schierloh			Registration Number, if PAC	
Street Address 1238 Ashland Ave.	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45420	Y 0	Amount \$40.00
Form (Cash, Check, etc.) Cash				
Full Name of Contributor Marty Malloy			Registration Number, if PAC	
Street Address 857 Sunnycreek Dr.	Employer/Occupation/Labor Organization*		M 0	D 4
City Dayton	State OH	Zip Code 45458	Y 0	Amount \$100.00
Form (Cash, Check, etc.) Cash				
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M	D
City	State OH	Zip Code	Y	Amount
Form (Cash, Check, etc.)				
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M	D
City	State OH	Zip Code	Y	Amount
Form (Cash, Check, etc.)				

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the Date column.

Total contributions this event

\$4,260.00

Total expenditures this event.

\$4.37

Michael J Bennett

Page Total \$ **\$440.00**

Print Form

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee				
Full Name of Contributor Ben Swift		Registration Number, if PAC		
Street Address PO Box 49637	Employer/Occupation/Labor Organization*	M 0	D 4	Y 0913
City Dayton	State OH	Zip Code 45449	Amount \$100.00	
Form (Cash, Check, etc.) Cash				
Full Name of Contributor Robert Curry		Registration Number, if PAC		
Street Address 530 Maysfield Rd.	Employer/Occupation/Labor Organization*	M 0	D 4	Y 1513
City Dayton	State OH	Zip Code 45419	Amount \$250.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor Dayton Build - PAC		Registration Number, if PAC PCE		
Street Address One Chamber Plaza, 22 East 5th St., 100-B	Employer/Occupation/Labor Organization* Homebuilders Association	M 0	D 4	Y 1513
City Dayton	State OH	Zip Code 45402	Amount \$150.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor Cas Houser		Registration Number, if PAC		
Street Address 4747 Burnham Lane	Employer/Occupation/Labor Organization*	M 0	D 4	Y 1513
City Kettering	State OH	Zip Code 45429	Amount \$50.00	
Form (Cash, Check, etc.) Cash				
Full Name of Contributor Deborah Lieberman		Registration Number, if PAC		
Street Address 7475 Kimmel Rd.	Employer/Occupation/Labor Organization*	M 0	D 4	Y 1513
City Clayton	State OH	Zip Code 45315	Amount \$500.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor Sara Woodhull		Registration Number, if PAC		
Street Address 4220 Trails End Dr.	Employer/Occupation/Labor Organization*	M 0	D 4	Y 1513
City Dayton	State OH	Zip Code 45429	Amount \$300.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor Alan Schaeffer		Registration Number, if PAC		
Street Address 134 Patterson Blvd.	Employer/Occupation/Labor Organization*	M 0	D 4	Y 1513
City Dayton	State OH	Zip Code 45419	Amount \$500.00	
Form (Cash, Check, etc.) Check				

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event

\$5,600.00

Total expenditures this event

\$0.00

Print Form

*Michael J Bonnett*Page Total \$ **\$1,850.00**

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full Al Wagner for Mayor Committ				
Full Name of Contributor Alan Schaeffer		Registration Number, if PAC		
Street Address 134 Patterson Rd.	Employer/Occupation/Labor Organization*	M 0	D 4	Y 1 5 1 3
City Dayton	State OH	Zip Code 45419	Form (Cash, Check, etc.) Check	Amount \$500.00
Full Name of Contributor Gary Codeluppi		Registration Number, if PAC		
Street Address 2032 Winding Brookway	Employer/Occupation/Labor Organization*	M 0	D 4	Y 1 5 1 3
City Xenia	State OH	Zip Code 45385	Form (Cash, Check, etc.) Check	Amount \$250.00
Full Name of Contributor George Houser		Registration Number, if PAC		
Street Address 4747 Burnham Lane	Employer/Occupation/Labor Organization*	M 0	D 4	Y 1 5 1 3
City Kettering	State OH	Zip Code 45429	Form (Cash, Check, etc.) Check	Amount \$50.00
Full Name of Contributor Rick McKiddy		Registration Number, if PAC		
Street Address 1415 Eagle Mountain Dr.	Employer/Occupation/Labor Organization* Elect Rick McKiddy State S	M 0	D 4	Y 1 5 1 3
City Miamisburg	State OH	Zip Code 45342	Form (Cash, Check, etc.) Check	Amount \$250.00
Full Name of Contributor Jean Graham		Registration Number, if PAC		
Street Address 346 Greenmount Blvd.	Employer/Occupation/Labor Organization*	M 0	D 4	Y 2 1 1 3
City Dayton	State OH	Zip Code 45419	Form (Cash, Check, etc.) Check	Amount \$100.00
Full Name of Contributor David Dickerson		Registration Number, if PAC		
Street Address 137 N. Main St. Suite 900	Employer/Occupation/Labor Organization*	M 0	D 4	Y 2 1 1 3
City Dayton	State OH	Zip Code 45402	Form (Cash, Check, etc.) Check	Amount \$250.00
Full Name of Contributor James Dayer		Registration Number, if PAC		
Street Address 1900 Kettering Tower	Employer/Occupation/Labor Organization*	M 0	D 4	Y 2 1 1 3
City Dayton	State OH	Zip Code 45423	Form (Cash, Check, etc.) Check	Amount \$500.00

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributors from form No. 31-E" and list the date of the event in the date column.

Total contributions this event

\$5,600.00

Total expenditures this event

\$0.00

Michael J Bennett

Page Total \$ 1,900.00

Print Form

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee				
Full Name of Contributor Bruce Nicholson			Registration Number, if PAC	
Street Address 7162 Thundering Herd Place	Employer/Occupation/Labor Organization*		M D Y 0 4 2 1 1 3	Amount \$250.00
City Dayton	State OH	Zip Code 45415	Form (Cash, Check, etc.) Check	
Full Name of Contributor Richard Skelton			Registration Number, if PAC	
Street Address 130 W. Second St. Suite 1818	Employer/Occupation/Labor Organization*		M D Y 0 4 2 1 1 3	Amount \$100.00
City Dayton	State OH	Zip Code 45402	Form (Cash, Check, etc.) Check	
Full Name of Contributor Jeff Samuelson			Registration Number, if PAC	
Street Address 1488 Forrer Blvd.	Employer/Occupation/Labor Organization* JZ Construction		M D Y 0 4 2 1 1 3	Amount \$2,000.00
City Kettering	State OH	Zip Code 45420	Form (Cash, Check, etc.) Check	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)	

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Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event

\$5,600.00

Total expenditures this event

\$0.00*Michael J Bennett*Page Total \$ **\$2,350.00**

Print Form

Statement of Expenditures for Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Reset Form

Name of Committee in Full AJ Wagner for Mayor Committee				
To Whom Paid Paypal	M 0	D 3	Y 2 7 1 3	Amount \$3.20
Address PO Box 45950		Purpose Fee for donation from Ronald Burdge		
City Omaha	State NE	Zip Code 68145	Check Number Paypal	
To Whom Paid Paypal	M 0	D 3	Y 2 7 1 3	Amount \$1.17
Address PO Box 45950		Purpose Fee for donation from Beth Habbegar		
City Omaha	State NE	Zip Code 68145	Check Number Paypal	
To Whom Paid	M	D	Y	Amount
Address		Purpose		
City	State OH	Zip Code	Check Number	
To Whom Paid	M	D	Y	Amount
Address		Purpose		
City	State OH	Zip Code	Check Number	
To Whom Paid	M	D	Y	Amount
Address		Purpose		
City	State OH	Zip Code	Check Number	
To Whom Paid	M	D	Y	Amount
Address		Purpose		
City	State OH	Zip Code	Check Number	
To Whom Paid	M	D	Y	Amount
Address		Purpose		
City	State OH	Zip Code	Check Number	

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

Michael J Bennett

\$4.37

Page Total \$

Print Form