

**JON HUSTED**  
Ohio Secretary of State



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**Ohio Campaign Finance Report**

Form 30-A

ORC 3517.10

PRE-PRIMARY

APR 26 2019

Committee Name <b>CITIZENS FOR CHRIS SHAW</b>		Office Sought <b>DAYTON COMMISSION</b>	District	
Street Address <b>3826 CORDELL DR</b>		City <b>KETTERING</b>	State <b>OH</b>	Zip <b>45439</b>
Candidate Name OR PAC Registration Number <b>Chris Shaw</b>		Treasurer Name <b>JOHN J. MURPHY</b>	Election Date (MM/DD/YYYY) <b>05/07/2019</b>	
<b>Type of Report (choose one):</b> <input type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input checked="" type="checkbox"/> Pre-Primary <input type="checkbox"/> Post-Primary <input type="checkbox"/> Pre-General <input type="checkbox"/> Post-General				
<b>Statewide Candidates Only:</b> <input type="checkbox"/> July Monthly <input type="checkbox"/> August Monthly <input type="checkbox"/> September Monthly				
Amended Report <input type="checkbox"/> No <input type="checkbox"/> Yes	Termination <input type="checkbox"/> Check this box if the committee wishes to terminate with this report	Short Form Report (R.C. 3517.10(H)) <input type="checkbox"/> Check this box if the committee is filing a short term report. See attached instructions.		

1. Amount brought forward from last report	17964.10
2. Total monetary contributions (From Forms 31-A and 31-E)	2210
3. Total other income (From Form 31-A-2)	0
4. Total funds available (sum of lines 1,2, and 3)	20174.10
5. Total monetary expenditures (From Forms 31-B and 31-F)	7702.14
6. Balance on hand (line 4 minus line 5)	12471.96
7. Value of in-kind contributions received (From Form 31-J-1)	0
8. Value of in-kind contributions made (From Form 31-J-2)	0
9. Outstanding loans owed by committee (From Form 31-C)	0
10. Outstanding debts owed by committee (From Form 31-N)	0
11. Outstanding loans owed to committee (From Form 31-K)	0
12. Value of independent expenditures made (From Form 31-U)	0

THIS STATEMENT IS MADE UNDER PENALTY OF ELECTION FALSIFICATION.  
WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

Signature of Treasurer or Deputy Treasurer

04/19/2019

Date (MM/DD/YYYY)

Contribution Pages  
**3**

Expenditure Pages  
**4**

Other Pages

Total Pages  
**7**

Last Updated 09/2017

## OFFICE OF THE

Ohio Secretary of State



## Statement of Contributions Received

Page 1

Form 31-A

ORC 3517.10

## Full Name of Committee

CITIZENS FOR CHRIS SHAW

## Full Name of Contributor

CHARLES J FRANELS

Registration Number, if PAC

## Street Address

3226 GERMANTOWN ST

Employer/Occupation/Labor Organization\*

Form (Cash, Check, etc.)

CHECK

## City

DAYTON

State



Zip Code

45408

Date (MM/DD/YYYY)

01/23/2019

Amount

50

## Full Name of Contributor

KERRY KERY GRAY

Registration Number, if PAC

## Street Address

3243 RIDGE AVE

Employer/Occupation/Labor Organization\*

Form (Cash, Check, etc.)

CHECK

## City

DAYTON

State



Zip Code

45414

Date (MM/DD/YYYY)

01/25/2019

Amount

100

## Full Name of Contributor

JOEL FRIEDMAN

Registration Number, if PAC

## Street Address

520 MAYSFIELD RD

Employer/Occupation/Labor Organization\*

Form (Cash, Check, etc.)

ONLINE

## City

DAYTON

State



Zip Code

45419

Date (MM/DD/YYYY)

01/28/2019

Amount

250

## Full Name of Contributor

MICHAEL WRIGHT

Registration Number, if PAC

## Street Address

2627 BRITANIA CT

Employer/Occupation/Labor Organization\*

Form (Cash, Check, etc.)

ONLINE

## City

XENIA

State



Zip Code

45385

Date (MM/DD/YYYY)

01/28/2019

Amount

500

## Full Name of Contributor

MADELINE ISELI

Registration Number, if PAC

## Street Address

38 BEVERLY PL

Employer/Occupation/Labor Organization\*

Form (Cash, Check, etc.)

ONLINE

## City

DAYTON OH

State



Zip Code

45419

Date (MM/DD/YYYY)

01/29/2019

Amount

100

\*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 1000



<b>Full Name of Committee</b> <i>CITIZENS For CHRIS SHAW</i>				
<b>Full Name of Contributor</b> <i>RICHARD CHAS DIXON</i>		<b>Registration Number, if PAC</b>		
<b>Street Address</b> <i>700 TERRINGTON PL</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b> <i>CHECK</i>
<b>City</b> <i>Dayton</i>	<b>State</b> <i>OH</i>	<b>Zip Code</b> <i>45406</i>	<b>Date (MM/DD/YYYY)</b> <i>01/31/2019</i>	<b>Amount</b> <i>250</i>
<b>Full Name of Contributor</b> <i>STEVEN WITT</i>				
<b>Street Address</b> <i>PO Box 10063</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b> <i>ONLINE</i>
<b>City</b> <i>Dayton</i>	<b>State</b> <i>OH</i>	<b>Zip Code</b> <i>45402</i>	<b>Date (MM/DD/YYYY)</b> <i>02/10/2019</i>	<b>Amount</b> <i>50</i>
<b>Full Name of Contributor</b> <i>Paul DiNino</i>				
<b>Street Address</b> <i>9216 LEVETTE DR</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b> <i>ONLINE</i>
<b>City</b> <i>CHEVY CHASE</i>	<b>State</b> <i>OH</i>	<b>Zip Code</b> <i>20815</i>	<b>Date (MM/DD/YYYY)</b> <i>02/14/2019</i>	<b>Amount</b> <i>500</i>
<b>Full Name of Contributor</b> <i>ALAN PIPER</i>				
<b>Street Address</b> <i>411 WATER ST STE 124</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b> <i>ONLINE</i>
<b>City</b> <i>Dayton</i>	<b>State</b> <i>OH</i>	<b>Zip Code</b> <i>45402</i>	<b>Date (MM/DD/YYYY)</b> <i>02/19/2019</i>	<b>Amount</b> <i>100</i>
<b>Full Name of Contributor</b> <i>John McCANCE</i>				
<b>Street Address</b> <i>3537 EMERALD CAT DR</i>		<b>Employer/Occupation/Labor Organization*</b>		<b>Form (Cash, Check, etc.)</b>
<b>City</b> <i>BEAVERCREEK</i>	<b>State</b> <i>OH</i>	<b>Zip Code</b> <i>45431</i>	<b>Date (MM/DD/YYYY)</b> <i>02/24/2019</i>	<b>Amount</b> <i>25</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**

Form 31-A

ORC 3517.10

**Full Name of Committee**

*CITIZENS For CHRIS SHAW*

<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>		
<i>COMMITTEE TO ELECT JEFFREY J MINIS SR</i>				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
<i>40 S Hannan ST</i>				<i>CHECK</i>
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
<i>DAYTON</i>	OH	<i>45402</i>	<i>3/13/2019</i>	<i>100</i>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>		
<i>JOHN McCANCE</i>				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
<i>3537 EMERALD AVE</i>				<i>ONLINE</i>
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
<i>BEAVER CREEK</i>	OH	<i>45431</i>	<i>03/24/2019</i>	<i>25</i>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>		
<i>MATTHEW CLEMPER</i>				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
<i>125 Bonner ST</i>				<i>ONLINE</i>
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
<i>DAYTON</i>	OH	<i>45410</i>	<i>03/28/2019</i>	<i>10</i>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>		
<i>MEGAN &amp; HOMAS</i>				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
<i>2724 DELMARTE AVE</i>				<i>ONLINE</i>
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
<i>LETTEDAWG</i>	OH	<i>45419</i>	<i>04/05/2019</i>	<i>50</i>
<b>Full Name of Contributor</b>		<b>Registration Number, if PAC</b>		
<i>Joy ALANE BANKSTON</i>				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
<i>1647 NEWTON AVE</i>				<i>ONLINE</i>
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
<i>DAYTON</i>	OH	<i>45406</i>	<i>04/05/2019</i>	<i>100</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)]

Page Total 285

OFFICE OF THE  
Ohio Secretary of State



Statement of Expenditures

Page 1

Form 31-B

R.C. 3517.10

Full Name of Committee

CITIZENS FOR CHRIS SHAW

To Whom Paid		Date (MM/DD/YYYY)	Amount
<del>Chris Shaw</del> CHRIS SHAW		01/25/2019	45
Street Address		Purpose	
3434 SURREY RIDGE WAY		REIMBURSEMENT FOR BOE FISHING FEE	
City		State	Zip Code
DAYTON		OH	45424
Check Number			
126			
To Whom Paid		Date (MM/DD/YYYY)	Amount
GENEVIEVE MURRAY		01/25/2019	722.50
Street Address		Purpose	
4127 WATER ST # 416		REIMBURSEMENT FOR FUND RAISER EXPENSE	
City		State	Zip Code
DAYTON		OH	45402
Check Number			
125			
To Whom Paid		Date (MM/DD/YYYY)	Amount
NAACP		01/28/2019	120
Street Address		Purpose	
1528 W. THIRD ST		DONATION	
City		State	Zip Code
DAYTON		OH	45402
Check Number			
127			
To Whom Paid		Date (MM/DD/YYYY)	Amount
PARITY INC		01/28/2019	120
Street Address		Purpose	
907 W. FIFTH ST		PROGRAM ADD	
City		State	Zip Code
DAYTON		OH	45402
Check Number			
128			
To Whom Paid		Date (MM/DD/YYYY)	Amount
FIFTH THIRD BANK		01/11/2019	11
Street Address		Purpose	
PO BOX 630900		SERVICE CHARGE	
City		State	Zip Code
CINCINNATI		OH	45263
Check Number			

Page Total \$ 218.50

1018.50



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee

CITIZENS FOR CHRIS SHAW

To Whom Paid		Date (MM/DD/YYYY)	Amount
Montgomery Co YOUNG DEMOCRATS			100
Street Address		Purpose	
313 S. JEFFERSON ST		CONTRIBUTION	
City		State	Zip Code
Dayton		OH	45402
Check Number			129 130
To Whom Paid		Date (MM/DD/YYYY)	Amount
MIAMI VALLEY SCHOOL GALA		02/14/2019	300
Street Address		Purpose	
5151 DENISE ST		CONTRIBUTION	
City		State	Zip Code
CENTERVILLE		OH	45429
Check Number			131
To Whom Paid		Date (MM/DD/YYYY)	Amount
DIXON UNITED METHODIST CHURCH		02/17/2019	20
Street Address		Purpose	
1691 INTERMAR RD		CONTRIBUTION	
City		State	Zip Code
Dayton		OH	45417
Check Number			130 129
To Whom Paid		Date (MM/DD/YYYY)	Amount
ACT BLUE		02/04/2019	37.89
Street Address		Purpose	
PO BOX 441146		SERVICE FEE	
City		State	Zip Code
SOMERVILLE		OH MA	02144
Check Number			ONLINE
To Whom Paid		Date (MM/DD/YYYY)	Amount
VANTW ECOMMERCE		02/11/2019	57.96
Street Address		Purpose	
8500 GOVERNORS HILL DR		SERVICE FEE	
City		State	Zip Code
SYMMES TOWNSHIP		OH	45249
Check Number			ONLINE

Page Total \$ 515.85

## Statement of Expenditures

Page 3

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>CITIZENS FOR CHRIS SHAW</b>			
To Whom Paid <b>GEN MURPHY &amp; ASSOCIATES LLC</b>		M 03 04 19	Amount 24
Address <b>427 WATER ST</b>	Purpose <b>REIMBURSEMENT FOR INTERNET DOMAIN</b>	State <b>OH</b>	Zip Code <b>45402</b>
City <b>DAYTON</b>	Check Number <b>132</b>		
To Whom Paid <b>MY CAMPAIGN STORE</b>		M 03 13 19	Amount 1282.38
Address <b>304 WHITTINGTON PKWY</b>	Purpose <b>CAMPAIGN SIGNS- PURCHASE</b>	State <b>KY</b>	Zip Code <b>40222</b>
City <b>Louisville</b>	Check Number <b>133</b>		
To Whom Paid <b>PHILIPPINE-AMERICAN SOCIETY</b>		M 03 25 19	Amount 25
Address <b>PO Box 2153</b>	Purpose <b>PROGRAM ADVERTISEMENT</b>	State <b>OH</b>	Zip Code <b>45401</b>
City <b>DAYTON</b>	Check Number <b>134</b>		
To Whom Paid <b>TOMMY OWENS ENTERTAINMENT</b>		M 03 25 19	Amount 250
Address <b>1434 CORDELL DR</b>	Purpose <b>DONATION FOR TALENT SHOW</b>	State <b>OH</b>	Zip Code <b>45404</b>
City <b>DAYTON</b>	Check Number <b>135</b>		
To Whom Paid <b>ACT BLUE</b>		M 03 04 19	Amount 10.13
Address <b>PO Box 44146</b>	Purpose <b>SERVICE FEE</b>	State <b>MA</b>	Zip Code <b>02144</b>
City <b>SOMERVILLE</b>	Check Number <b>ONLINE</b>		
To Whom Paid <b>VANTIV E. COMMERCE</b>		M 03 11 19	Amount 19.22
Address <b>8500 GOVERNORS HILL DR</b>	Purpose <b>SERVICE FEE</b>	State <b>OH</b>	Zip Code <b>45249</b>
City <b>SYMMES TOWNSHIP</b>	Check Number <b>ONLINE</b>		
To Whom Paid <b>JM2</b>		M 04 02 19	Amount 897.06
Address <b>6819 LINBROOK BLVD</b>	Purpose <b>PALM CARD PURCHASE</b>	State <b>OH</b>	Zip Code <b>43235</b>
City <b>COLUMBUS</b>	Check Number <b>136</b>		
To Whom Paid <b>OHIO ETHICS COMMISSION</b>		M 04 08 19	Amount 35
Address <b>30 W. SPRING ST</b>	Purpose <b>FILING FEE</b>	State <b>OH</b>	Zip Code <b>43215</b>
City <b>COLUMBUS</b>	Check Number <b>ELECTRONIC CHECK</b>		

2542.79

~~2518.79~~

## Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full

CITIZENS FOR CHRIS SHAW

To Whom Paid	Montgomery Co. Democratic Party			M	D	Y	Amount	
Address	313 S. JEFFERSON ST			MAIL PROGRAM FREE				
City	Dayton	State	Zip Code	138				
To Whom Paid	U.S. POSTAL SERVICE			M	D	Y	Amount	
Address	1111 E. FIFTH ST			PURCHASE OF STAMPS				
City	Dayton	State	Zip Code	137				
To Whom Paid	Montgomery Co. Democratic Party			M	D	Y	Amount	
Address	313 S. JEFFERSON ST			041119 300				
City	Dayton	State	Zip Code	139				
To Whom Paid				M	D	Y	Amount	
Address								
City	State	Zip Code						
To Whom Paid				M	D	Y	Amount	
Address								
City	State	Zip Code						
To Whom Paid				M	D	Y	Amount	
Address								
City	State	Zip Code						
To Whom Paid				M	D	Y	Amount	
Address								
City	State	Zip Code						
To Whom Paid				M	D	Y	Amount	
Address								
City	State	Zip Code						
To Whom Paid				M	D	Y	Amount	
Address								
City	State	Zip Code						