



SHAW

Ohio Campaign Finance Report

Form 30-A
ORC 3517.10

Committee Name CITIZENS FOR CHRIS SHAW		Office Sought DAYTON COMMISSIONER		District
Street Address 3826 CORDELL DR		City KETTERING	State OH	Zip 45439
Candidate Name OR PAC Registration Number CHRIS SHAW		Treasurer Name JOHN J. MURPHY		Election Date (MM/DD/YYYY) 11/05/2019
Type of Report (choose one): <input type="checkbox"/> Annual <input type="checkbox"/> Semiannual <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Post-Primary <input checked="" type="checkbox"/> Pre-General <input type="checkbox"/> Post-General				
Statewide Candidates Only: <input type="checkbox"/> July Monthly <input type="checkbox"/> August Monthly <input type="checkbox"/> September Monthly				Year <div style="border: 1px solid black; height: 20px; width: 100px;"></div>
Amended Report <input checked="" 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	11,961.47
2. Total monetary contributions (From Forms 31-A and 31-E)	30,358.75
3. Total other income (From Form 31-A-2)	0
4. Total funds available (sum of lines 1, 2, 3)	42,320.22
5. Total monetary expenditures (From Forms 31-B and 31-F)	27,162.98
6. Balance on hand (line 4 minus line 5)	15,157.24
7. Value of in-kind contributions received (From Form 31-J-1)	251.55
8. Value of in-kind contributions made (From Form 31-J-2)	
9. Outstanding loans owed by committee (From Form 31-C)	
10. Outstanding debts owed by committee (From Form 31-N)	
11. Outstanding loans owed to committee (From Form 31-K)	
12. Value of independent expenditures made (From Form 31-U)	

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 BOARD OF ELECTIONS
 MONROE COUNTY, OHIO

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

John J. Murphy
 Signature of Treasurer or Deputy Treasurer

10/17/2019
 Date (MM/DD/YYYY)

Contribution Pages
24

Expenditure Pages
8

Other Pages
1

Total Pages
33



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor REGINA ROBERTS			Registration Number, if PAC	
Street Address 2538 BRIDGEPORT DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CASH
City DAYTON	State OH	Zip Code 45406	Date (MM/DD/YYYY) 06/21/2019	Amount 50.00
Full Name of Contributor DAYTON FIREFIGHTERS LOCAL 136 FIRE PAC			Registration Number, if PAC	
Street Address 145 WARREN ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45402	Date (MM/DD/YYYY) 06/21/2019	Amount 500.00
Full Name of Contributor ASCME OHIO COUNCIL 8 AFL-CIO			Registration Number, if PAC	
Street Address 6800 N. HIGH ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City WORTHINGTON	State OH	Zip Code 43085	Date (MM/DD/YYYY) 06/21/2019	Amount 1000.00
Full Name of Contributor JOHN MC CANE			Registration Number, if PAC	
Street Address 3537 EMERALD CTR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City BEAVERCREEK	State OH	Zip Code 45431	Date (MM/DD/YYYY) 06/26/2019	Amount 25.00
Full Name of Contributor MUHAMMAD AL-HAMDANI			Registration Number, if PAC	
Street Address 120 W. SECOND ST #325		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH	Zip Code 45402	Date (MM/DD/YYYY) 07/23/2019	Amount 150.00

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

Page Total

1750

1725.00



Full Name of Committee CITIZENS FOR CHRIS STAN				
Full Name of Contributor JENNIFER GARSON			Registration Number, if PAC	
Street Address 1242 D STREET N.E.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City WASHINGTON	State DC	Zip Code 2002	Date (MM/DD/YYYY) 07/24/2019	Amount 100.00
Full Name of Contributor JOHN MCCANCE			Registration Number, if PAC	
Street Address 3537 EMERALD CAT DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City BEAVERCREEK	State OH	Zip Code 45431	Date (MM/DD/YYYY) 07/24/2019	Amount 25.00
Full Name of Contributor DAYTON MIAMI VALLEY AFL-CIO VOTER EDUCATION FUND			Registration Number, if PAC	
Street Address 6550 POE AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45414	Date (MM/DD/YYYY) 07/26/2019	Amount 500.00
Full Name of Contributor DARYL WARD			Registration Number, if PAC	
Street Address 237 E. FIRST ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45402	Date (MM/DD/YYYY) 07/29/2019	Amount 250.00
Full Name of Contributor AFSCME OHIO Council 8 AFL-CIO			Registration Number, if PAC	
Street Address 6800 NORTH HIGH ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City WORTHINGTON, OH	State OH	Zip Code 43085	Date (MM/DD/YYYY) 08/21/2019	Amount 1000.00

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Statement of Contributions Received

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Form 31-A

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor LABORERS LOCAL #1410 POLITICAL			Registration Number, if PAC	
Street Address 2228 E. 9TH ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45403	Date (MM/DD/YYYY) 08/21/2019	Amount 1000.00
Full Name of Contributor WILLIAM A MONITA			Registration Number, if PAC	
Street Address 667 RENOLDA WOODS CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City KETTERING	State OH <input type="checkbox"/>	Zip Code 45429	Date (MM/DD/YYYY) 08/21/2019	Amount 250.00
Full Name of Contributor IRON WORKERS LOCAL 296 PCE			Registration Number, if PAC	
Street Address 4191 E. US ROUTE 46		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City TIPP CITY	State OH <input type="checkbox"/>	Zip Code 45371	Date (MM/DD/YYYY) 08/21/2019	Amount 200.00
Full Name of Contributor PLUMBERS AND PIPEFITTERS LOCAL #162			Registration Number, if PAC	
Street Address 1260 E. SECOND ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45403	Date (MM/DD/YYYY) 08/21/2019	Amount 500.00
Full Name of Contributor THOMAS WAHLRAB			Registration Number, if PAC	
Street Address 314 E. SIXTH ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45402	Date (MM/DD/YYYY) 08/27/2019	Amount 25.00

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor MATTHEW L JESCH			Registration Number, if PAC	
Street Address 114 W. MONUMENT AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45402	Date (MM/DD/YYYY) 09/02/2019	Amount 500.00
Full Name of Contributor ELIZABETH J LOLL			Registration Number, if PAC	
Street Address 525 WATER ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45402	Date (MM/DD/YYYY) 09/02/2019	Amount 100.00
Full Name of Contributor MICHELLE ROBERTS			Registration Number, if PAC	
Street Address 1115 WISCONSIN BLVD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45417	Date (MM/DD/YYYY) 09/02/2019	Amount 250.00
Full Name of Contributor TIMOTHY KAMBITSCH			Registration Number, if PAC	
Street Address 74 GREEN ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45402	Date (MM/DD/YYYY) 09/02/2019	Amount 100.00
Full Name of Contributor PATRICIA B. FRANCIS			Registration Number, if PAC	
Street Address 3226 GERMANTOWN ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45408	Date (MM/DD/YYYY) 09/02/2019	Amount 200.00

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Statement of Contributions Received

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Form 31-A

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor DARYL VAUGHN			Registration Number, if PAC	
Street Address 2725 S. SIERRA ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City GILBERT	State AZ	Zip Code 85295	Date (MM/DD/YYYY) 08/30/2019	Amount 250.00 ✓
Full Name of Contributor GEORGENE DAWSON			Registration Number, if PAC	
Street Address 185 WRENWOOD CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE 100.00
City ENGLEWOOD	State	Zip Code 45322	Date (MM/DD/YYYY) 08/30/2019	Amount 100.00 ✓
Full Name of Contributor JASON WOODARD			Registration Number, if PAC	
Street Address 146 CASTLE PINE CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City XENIA	State OH	Zip Code 45385	Date (MM/DD/YYYY) 08/29/2019	Amount 250.00
Full Name of Contributor MELISSA RODRIGUEZ			Registration Number, if PAC	
Street Address 622 HAMPSHIRE RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH	Zip Code 45419	Date (MM/DD/YYYY) 09/02/2019	Amount 25.00
Full Name of Contributor MATTHEW JOSEPH			Registration Number, if PAC	
Street Address 1338 ASHLAND AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH	Zip Code 45420	Date (MM/DD/YYYY) 09/03/2019	Amount 100.00

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Page Total 725.00



Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor LELA KLEIN			Registration Number, if PAC	
Street Address 214 ADAMS ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45410	Date (MM/DD/YYYY) 09/03/2019	Amount 50.00
Full Name of Contributor KATHERINE COOPER			Registration Number, if PAC	
Street Address 2046 WINDING BROOK WAY		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City XENIA	State OH <input type="checkbox"/>	Zip Code 45385	Date (MM/DD/YYYY) 09/03/2019	Amount 5.00
Full Name of Contributor CHRISTOPHER KERSHNER			Registration Number, if PAC	
Street Address 8888 GLEN ABBEY CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City SPRINGBORO	State OH <input type="checkbox"/>	Zip Code 45066	Date (MM/DD/YYYY) 09/03/2019	Amount 500.00
Full Name of Contributor KERRY GRAY			Registration Number, if PAC	
Street Address 3243 RIDGE AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45414	Date (MM/DD/YYYY) 09/04/2019	Amount 100.00
Full Name of Contributor RONALD F. BUDZIK			Registration Number, if PAC	
Street Address 7395 CADES CV		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City CENTERVILLE	State OH <input type="checkbox"/>	Zip Code 45459	Date (MM/DD/YYYY) 09/04/2019	Amount 200.00

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor PHILLIP PARKER			Registration Number, if PAC	
Street Address 667 BROOKMEADE CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City BEAVERCREEK	State OH	Zip Code 45434	Date (MM/DD/YYYY) 09/04/2019	Amount 500.00
Full Name of Contributor RHINE McLIN			Registration Number, if PAC	
Street Address 23 N. PAUL L. DUNBAR ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45402	Date (MM/DD/YYYY) 09/04/2019	Amount 100.00
Full Name of Contributor JENNIFER HEAPHY			Registration Number, if PAC	
Street Address 10509 CRAINS CREEK RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City MIAMISBURG	State OH	Zip Code 45342	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor VICKI GIAMBROWE			Registration Number, if PAC	
Street Address 1199 PICKETT RIDGE CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH	Zip Code 45434	Date (MM/DD/YYYY) 09/04/2019	Amount 500.00
Full Name of Contributor WILLIS BLACKSHEAR			Registration Number, if PAC	
Street Address 531 BELMONT PARK N		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH	Zip Code 45405	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor GREG WEST			Registration Number, if PAC	
Street Address 4473 CURUNDU AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH	Zip Code 45416	Date (MM/DD/YYYY) 09/05/2019	Amount 25.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount

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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor ALONZO EDMONDS			Registration Number, if PAC	
Street Address 3126 VALARIE ARMS DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CASH
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45405	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor LYNETTE GRIGSBY			Registration Number, if PAC	
Street Address 4503 DAYTON LIBERTY RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CASH
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45417	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor DERRICK FOWARD			Registration Number, if PAC	
Street Address 4215 BREEZEWOOD AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CASH
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45406	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor SYLVIA WRIGHT			Registration Number, if PAC	
Street Address 3435 S. UNION RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CASH
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45417	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor MONNIE BUSH			Registration Number, if PAC	
Street Address 144 CENTRAL AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CASH
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45406	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00

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Statement of Contributions Received

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor CINNAMON D PELLY			Registration Number, if PAC	
Street Address 6284 COLLEGEVUE PL		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City CINCINNATI	State OH	Zip Code 45224	Date (MM/DD/YYYY) 09/05/2019	Amount 50.00
Full Name of Contributor CAROLYN MACK			Registration Number, if PAC	
Street Address 450 W. GRAND AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45405	Date (MM/DD/YYYY) 09/05/2019	Amount 50.00
Full Name of Contributor FRANKIE D BROWN			Registration Number, if PAC	
Street Address 415 RED-WOOD AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45405	Date (MM/DD/YYYY) 09/05/2019	Amount 50.00
Full Name of Contributor FRIENDS OF WINBURN			Registration Number, if PAC	
Street Address 3636 WALES DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45405	Date (MM/DD/YYYY) 09/05/2019	Amount 75.00
Full Name of Contributor VIRGINIA HILL			Registration Number, if PAC	
Street Address 4551 DAYTON LIBERTY RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45417	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00

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Statement of Contributions Received

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Full Name of Committee CITIZENS FOR CHRIS SHAN				
Full Name of Contributor JARETH JEFFERSON			Registration Number, if PAC	
Street Address 339 BROOKSIDE DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45406	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor CAROLYN RICE			Registration Number, if PAC	
Street Address 1135 GREEN TREE DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45429	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor JUDY HENNESSEY			Registration Number, if PAC	
Street Address 23 TECUMSEH ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45402	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor JULIE LISS-KATZ			Registration Number, if PAC	
Street Address 7061 SOCIETY CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45414	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor MARVA COSBY			Registration Number, if PAC	
Street Address 5785 SWAN DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City CLAYTON	State OH	Zip Code 45315	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00

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Page Total 500.00



Statement of Contributions Received

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Full Name of Committee CITIZENS For CHRIS SHAW				
Full Name of Contributor LAWRENCE E. PORTER			Registration Number, if PAC	
Street Address 161 COPPER FIELD DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45415	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor MARTIN GEHRES			Registration Number, if PAC	
Street Address 208 WROE AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45406	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor DODGE FOR COMMISSIONER			Registration Number, if PAC	
Street Address 998 MARYCREST LANE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45429	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor JOSEPH W. SHAW JR			Registration Number, if PAC	
Street Address 4550 BERQUIST DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45426	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor RICHARD AUSTIN			Registration Number, if PAC	
Street Address 1415 EARLHAM DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45406	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor BARBARA GORMAN			Registration Number, if PAC	
Street Address 7462 WARRIOR CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45415	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor KEN THOMAS			Registration Number, if PAC	
Street Address 206 BRANT ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45404	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor ADELE M. RILEY			Registration Number, if PAC	
Street Address 625 ELLSWORTH DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City TROTWOOD	State OH <input type="checkbox"/>	Zip Code 45426	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor BRANDON C McCHAIN			Registration Number, if PAC	
Street Address 715 TORRINGTON PL		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45406	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor DAVID C. DICKERSON			Registration Number, if PAC	
Street Address 137 N. MAIN ST STE 900		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45402	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00

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



Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor RONITA HAWES - SAUNDERS			Registration Number, if PAC	
Street Address 1773 KYLEMORE CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City CENTERVILLE	State OH	Zip Code 45459	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor RICHARD CLAY DIXON			Registration Number, if PAC	
Street Address 700 TORRINGTON PL		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45406	Date (MM/DD/YYYY) 09/05/2019	Amount 150.00
Full Name of Contributor JEFFREY J. MIMS JR			Registration Number, if PAC	
Street Address 40 SHANNON ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45402	Date (MM/DD/YYYY) 09/05/2019	Amount 200.00
Full Name of Contributor MICHELLE RASHAD			Registration Number, if PAC	
Street Address 8566 112TH TER. N		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City WEST PALM BEACH	State FL	Zip Code 33412	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00
Full Name of Contributor COMMITTEE TO ELECT FRED STRAHORN			Registration Number, if PAC	
Street Address 531 BELMONT PARK		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45406	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00

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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor COMMITTEE TO KEEP MARK OWENS CHECK			Registration Number, if PAC	
Street Address 3927 SADDLE RIDGE CIR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45424	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00
Full Name of Contributor DANIEL BEHRES			Registration Number, if PAC	
Street Address 232 WROE AVE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45406	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00
Full Name of Contributor KEEP KEITH AUDITOR			Registration Number, if PAC	
Street Address 241 TOPTON DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City VANDALIA	State OH	Zip Code 45377	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00
Full Name of Contributor AGNES M. GEORGE			Registration Number, if PAC	
Street Address 3313 WALDECK PL		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45405	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00
Full Name of Contributor GERARD O. FARLEY			Registration Number, if PAC	
Street Address 410 PAMELA SUE DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City KETTERING	State OH	Zip Code 45429	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00

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NAME OF CONTRIBUTOR	ADDRESS	CITY	STATE	ZIP	DATE RECEIVED	AMOUNT	TYPE OF CONTRIBUTION
John Doe	123 Main St	Anytown	CA	90210	12/15/2023	\$50.00	Cash
Jane Smith	456 Oak Ave	Springfield	IL	62701	12/16/2023	\$25.00	Check
Bob Johnson	789 Elm St	Chicago	IL	60601	12/17/2023	\$100.00	Cash
Alice Brown	101 Maple Dr	Los Angeles	CA	90001	12/18/2023	\$75.00	Check
Charlie Davis	202 Pine Rd	San Francisco	CA	94101	12/19/2023	\$30.00	Cash
Diana Evans	303 Cedar Ln	Seattle	WA	98101	12/20/2023	\$150.00	Check
Frank Green	404 Birch St	Portland	OR	97201	12/21/2023	\$40.00	Cash
Grace Hill	505 Spruce Ave	Denver	CO	80201	12/22/2023	\$60.00	Check
Henry King	606 Willow Dr	Phoenix	AZ	85001	12/23/2023	\$20.00	Cash
Ivy Lee	707 Ash St	San Diego	CA	92101	12/24/2023	\$90.00	Check
Jack Miller	808 Hickory Ln	San Jose	CA	95101	12/25/2023	\$120.00	Cash
Karen Nelson	909 Walnut Ave	San Antonio	TX	78201	12/26/2023	\$55.00	Check
Leo Parker	1010 Cherry St	San Luis Obispo	CA	93401	12/27/2023	\$35.00	Cash
Mia Quinn	1111 Magnolia Dr	San Marcos	CA	92371	12/28/2023	\$85.00	Check
Noah Reed	1212 Sycamore Rd	San Bernardino	CA	92401	12/29/2023	\$45.00	Cash
Olivia Scott	1313 Dogwood Ln	San Clemente	CA	92671	12/30/2023	\$110.00	Check
Peter Taylor	1414 Redwood Ave	San Diego	CA	92101	12/31/2023	\$65.00	Cash

Report of the Committee on the Receipts and Disbursements of the Association for the year ending December 31, 2023. The total amount received was \$1,234.56 and the total amount disbursed was \$876.54. The balance on hand at the end of the year was \$358.02.



Statement of Contributions Received

Form 31-A

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor FRIENDS OF ROSS JOSEPH			Registration Number, if PAC	
Street Address 443 E. SIXTH ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45402	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00
Full Name of Contributor JENELL ROSS			Registration Number, if PAC	
Street Address 85 LOOP RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City CENTERVILLE	State OH	Zip Code 45459	Date (MM/DD/YYYY)	Amount 250.00
Full Name of Contributor DIANE EWING			Registration Number, if PAC	
Street Address 411 WATER ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45402	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00
Full Name of Contributor ELOISE BROWER			Registration Number, if PAC	
Street Address 1921 ALDA CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45459	Date (MM/DD/YYYY) 09/05/2019	Amount 250.00
Full Name of Contributor NNODUM IHEME			Registration Number, if PAC	
Street Address 5105 ROLLMAN ESTATES DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City CINCINNATI	State OH	Zip Code 45236	Date (MM/DD/YYYY) 09/05/2019	Amount 350.00

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



Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor BILLIE LUENTE-BAKER			Registration Number, if PAC	
Street Address 7691 STATE ROUTE 55		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City LUDLOW FALLS	State OH <input type="checkbox"/>	Zip Code 45339	Date (MM/DD/YYYY) 09/05/2019	Amount 400.00
Full Name of Contributor GRONER FOR ENGINEER CAMPAIGN			Registration Number, if PAC	
Street Address 7154 MOHAWK TRL RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45459	Date (MM/DD/YYYY) 09/05/2019	Amount 500.00
Full Name of Contributor ELAINE M. DEAN			Registration Number, if PAC	
Street Address 769 PLANTATION LN		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City KETTERING	State OH <input type="checkbox"/>	Zip Code 45419	Date (MM/DD/YYYY) 09/05/2019	Amount 500.00
Full Name of Contributor BARBARA JOHNSON			Registration Number, if PAC	
Street Address 55 RIPPLING BROOK LN		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City SPRINGBORO	State OH <input type="checkbox"/>	Zip Code 45066	Date (MM/DD/YYYY) 09/05/2019	Amount 500.00
Full Name of Contributor MARY H BOOSALIS			Registration Number, if PAC	
Street Address 524 WALNUT SPRINGS DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45419	Date (MM/DD/YYYY) 09/05/2019	Amount 500.00

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Statement of Contributions Received

Form 31-A

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Full Name of Committee CITIZENS FOR CHRIS				
Full Name of Contributor NEW VOICE PAC			Registration Number, if PAC	
Street Address 35 E. GAY ST STE 248		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City COLUMBUS	State OH <input type="checkbox"/>	Zip Code 43215	Date (MM/DD/YYYY) 09/05/2019	Amount 1,000.00
Full Name of Contributor DAYTON AREA BOARD OF REALTORS PAC			Registration Number, if PAC	
Street Address 1515 S. MAIN ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45409	Date (MM/DD/YYYY) 09/05/2019	Amount 1,000.00
Full Name of Contributor IBEW PAC PAC VOLUNTARY FUND			Registration Number, if PAC	
Street Address 900 SEVENTH ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City WASHINGTON	State DC <input type="checkbox"/>	Zip Code 20001	Date (MM/DD/YYYY) 09/05/2019	Amount 1,250.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State <input type="checkbox"/>	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State <input type="checkbox"/>	Zip Code	Date (MM/DD/YYYY)	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 also appear. [R.C. 3517.10(B)(4)]



Statement of Contributions Received

Form 31-A

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor TERESA JOHNSON			Registration Number, if PAC	
Street Address 134 HORACE ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH	Zip Code 45402	Date (MM/DD/YYYY) 09/06/2019	Amount 100
Full Name of Contributor MAXTON A. SINGLETARY			Registration Number, if PAC	
Street Address 1430 SOARING HEIGHTS DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45440	Date (MM/DD/YYYY) 09/11/2019	Amount 100.00
Full Name of Contributor SYLVESTER J. TOWNSEND JR			Registration Number, if PAC	
Street Address 6575 RIVERBEND DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45415	Date (MM/DD/YYYY) 09/11/2019	Amount 350.00
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	Date (MM/DD/YYYY) 09/11/2019	Amount 250.00
Full Name of Contributor PAUL HUMBLE			Registration Number, if PAC	
Street Address 1927 BURBANK DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH	Zip Code 45406	Date (MM/DD/YYYY) 09/11/2019	Amount 100.00

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Statement of Contributions Received

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor JOHN E. MOORE			Registration Number, if PAC	
Street Address 23 KIMBERLY CIR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45417	Date (MM/DD/YYYY) 09/11/2019	Amount 50.00
Full Name of Contributor TONY HALL			Registration Number, if PAC	
Street Address 2560 NORTH 23 RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City ARLINGTON	State VA <input type="checkbox"/>	Zip Code 22207	Date (MM/DD/YYYY) 09/11/2019	Amount 250.00
Full Name of Contributor DAVID ABNEY II			Registration Number, if PAC	
Street Address 4267 GLENBROOK DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45406	Date (MM/DD/YYYY) 09/12/2019	Amount 100.00
Full Name of Contributor LARRY C JENKINS			Registration Number, if PAC	
Street Address 1623 OLMSTED PL		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45406	Date (MM/DD/YYYY) 09/12/2019	Amount 50.00
Full Name of Contributor ALAN F. PIPPENGER			Registration Number, if PAC	
Street Address 411 WATER ST APT 124		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45402	Date (MM/DD/YYYY) 09/12/2019	Amount 100.00

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



Statement of Contributions Received

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor FRIEDA BRIGNER			Registration Number, if PAC	
Street Address 330 W. FIRST ST APT 606		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45402	Date (MM/DD/YYYY) 09/12/2019	Amount 250.00
Full Name of Contributor PAUL DININO			Registration Number, if PAC	
Street Address 9216 LEVELLE DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City CHEVY CHASE	State MD <input type="checkbox"/>	Zip Code 20815	Date (MM/DD/YYYY) 09/23/2019	Amount 500.00
Full Name of Contributor RUSSELL GOTTESMAN			Registration Number, if PAC	
Street Address 1 OAKWOOD AVE #542		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City OAKWOOD	State OH <input type="checkbox"/>	Zip Code 45409	Date (MM/DD/YYYY) 09/23/2019	Amount 50.00
Full Name of Contributor AFSCME OHIO COUNCIL PAC # LA1273			Registration Number, if PAC LA1273	
Street Address 6800 N. HIGH ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City WORTHINGTON	State OH <input type="checkbox"/>	Zip Code 43085	Date (MM/DD/YYYY) 09/25/2019	Amount 1500.00
Full Name of Contributor FRANCES E. MCGEE - CROMARTIE			Registration Number, if PAC	
Street Address 1325 PRINCETON DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45406	Date (MM/DD/YYYY) 09/25/2019	Amount 100.00

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Full Name of Committee CITIZENS FOR CHRIS SHAW				
Full Name of Contributor ROBERT E. WALKER			Registration Number, if PAC	
Street Address 4516 COLLEGE VIEW DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45417	Date (MM/DD/YYYY) 09/25/2019	Amount 150.00
Full Name of Contributor CARL S HENDERSON			Registration Number, if PAC	
Street Address 4509 LARCHTREE CT		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45424	Date (MM/DD/YYYY) 09/25/2019	Amount 250.00
Full Name of Contributor DAYTON BUILDING TRADES COUNCIL PC			Registration Number, if PAC	
Street Address 1200 E. SECOND ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45403	Date (MM/DD/YYYY) 09/25/2019	Amount 500.00
Full Name of Contributor MATTHEW KLEMPER			Registration Number, if PAC	
Street Address 125 BONNER ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH <input type="checkbox"/>	Zip Code 45410	Date (MM/DD/YYYY) 09/26/2019	Amount 10.00
Full Name of Contributor G.S. ADEBISI ADEGBILE M.D.			Registration Number, if PAC	
Street Address 2301 PERIN RD		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City SPRINGBORO	State OH <input type="checkbox"/>	Zip Code 45066	Date (MM/DD/YYYY) 09/26/2019	Amount 100.00

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Statement of Contributions Received

Form 31-A

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Full Name of Committee <u>CITIZENS FOR CHRIS SHAW</u>				
Full Name of Contributor <u>EARL GUY</u>			Registration Number, if PAC	
Street Address <u>5187 DAYTON LIBERTY RD</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>ONLINE</u>
City <u>DAYTON</u>	State <u>OH</u>	Zip Code <u>45417</u>	Date (MM/DD/YYYY) <u>10/02/2019</u>	Amount <u>50.00</u>
Full Name of Contributor <u>FRIENDS OF MATT JOSEPH</u>			Registration Number, if PAC	
Street Address <u>443 E. SIXTH ST</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>CHECK</u>
City <u>DAYTON</u>	State <u>OH</u>	Zip Code <u>45402</u>	Date (MM/DD/YYYY) <u>10/11/2019</u>	Amount <u>43.75</u>
Full Name of Contributor <u>COMMITTEE TO ELECT FRED STRAHLEN</u>			Registration Number, if PAC	
Street Address <u>531 BELMONT PARK</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>CHECK</u>
City <u>DAYTON</u>	State <u>OH</u>	Zip Code <u>45405</u>	Date (MM/DD/YYYY) <u>10/11/2019</u>	Amount <u>500.00</u>
Full Name of Contributor <u>MICHAEL E. DYER</u>			Registration Number, if PAC	
Street Address <u>131 N. LUDLOW ST STE 1400</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>CHECK</u>
City <u>DAYTON</u>	State <u>OH</u>	Zip Code <u>45402</u>	Date (MM/DD/YYYY) <u>10/11/2019</u>	Amount <u>250.00</u>
Full Name of Contributor <u>FRIENDS OF NAW WHALEY</u>			Registration Number, if PAC	
Street Address <u>443 E. SIXTH ST</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>CHECK</u>
City <u>DAYTON</u>	State <u>OH</u>	Zip Code <u>45402</u>	Date (MM/DD/YYYY) <u>10/11/2019</u>	Amount <u>500.00</u>

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Statement of Contributions Received

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Form 31-A

ORC 3517.10

Full Name of Committee CITIZENS For CHRIS SHAW				
Full Name of Contributor LARRY CONNOL			Registration Number, if PAC	
Street Address 10510 SPRINGBERG PIKE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City MIAMISBURG	State OH <input checked="" type="checkbox"/>	Zip Code 45342	Date (MM/DD/YYYY) 10/11/2019	Amount 2500.00
Full Name of Contributor DOUG MANN			Registration Number, if PAC	
Street Address 131 N. LUDLOW ST STE 1400		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input checked="" type="checkbox"/>	Zip Code 45402	Date (MM/DD/YYYY) 10/11/2019	Amount 250.00
Full Name of Contributor TED GUDOLF			Registration Number, if PAC	
Street Address 8153 N. MAIN ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input checked="" type="checkbox"/>	Zip Code 45415	Date (MM/DD/YYYY) 10/13/2019	Amount 100.00
Full Name of Contributor DAMON WOODS			Registration Number, if PAC	
Street Address 8153 N. MAIN ST		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK
City DAYTON	State OH <input checked="" type="checkbox"/>	Zip Code 45415	Date (MM/DD/YYYY) 10/13/2019	Amount 100.00
Full Name of Contributor BETH WITHELLEY			Registration Number, if PAC	
Street Address 1545 GATEKEEPER WAY		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ON LINE
City DAYTON	State OH <input checked="" type="checkbox"/>	Zip Code 45458	Date (MM/DD/YYYY) 10/13/2019	Amount 50.00

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Page Total 3,000.00



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee CITIZENS For CHRIS SHAW			
To Whom Paid VANTIV E. COMMENCE		Date (MM/DD/YYYY) 06/11/2019	Amount 1.35
Street Address 8500 GOVERNOR'S HILL DR		Purpose PROCESSING FEE	
City Symmes Township	State OH	Zip Code 45249	Check Number ONLINE
To Whom Paid JM ²		Date (MM/DD/YYYY) 06 07/18/2019	Amount 750.00
Street Address 6919 LINBROOK DR		Purpose PHOTO SHOOT	
City Columbus	State OH	Zip Code 43249 45325	Check Number 143
To Whom Paid MINUTE MAN PRESS OF DAYTON		Date (MM/DD/YYYY) 07/25/2019	Amount 514.28
Street Address 2599 NEEDMORE RD		Purpose TEE SHIRTS	
City Dayton	State OH	Zip Code 45414	Check Number 144
To Whom Paid MONTGOMERY COUNTY DEMOCRATIC PARTY		Date (MM/DD/YYYY) 07/25/2019	Amount 70.00
Street Address 313 S. JEFFERSON ST		Purpose LADIES luncheon	
City Dayton	State OH	Zip Code 45402	Check Number 145
To Whom Paid AFL-CIO		Date (MM/DD/YYYY) 07/26/2019	Amount 150.00
Street Address 6550 POE AVE		Purpose GOLF OUTING	
City Dayton	State OH	Zip Code 45414	Check Number 146

Page Total \$ 1485.63



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee CITIZENS FOR CHRIS SHAW			
To Whom Paid VANTIV E COMMERCE		Date (MM/DD/YYYY) 07/09/2019	Amount 1.35
Street Address 8500 GOVERNORS HILL DR		Purpose PROCESSING FEE	
City SYMMES TOWNSHIP	State OH	Zip Code 45249	Check Number ONLINE
To Whom Paid JM2		Date (MM/DD/YYYY) 08/19/2019	Amount 1400.00
Street Address 6919 LINBROOK DR		Purpose PALM CARDS	
City COLUMBUS	State OH	Zip Code 45325	Check Number 147
To Whom Paid U.S. POSTMASTER		Date (MM/DD/YYYY) 08/23/2019	Amount 175.00
Street Address 1111 E. FIFTH ST		Purpose POSTAGE STAMPS	
City DAYTON	State OH	Zip Code 45401	Check Number 148
To Whom Paid AET BLUE		Date (MM/DD/YYYY) 08/08/2019	Amount 4.13
Street Address PO BOX 441146		Purpose SERVICE FEE	
City SOMMERVILLE	State MA	Zip Code 02144	Check Number ONLINE
To Whom Paid VANTIV E COMMERCE		Date (MM/DD/YYYY) 08/09/2019	Amount 9.11
Street Address 8500 GOVERNORS HILL RD		Purpose SERVICE FEE	
City SYMMES TOWNSHIP	State OH	Zip Code 45249	Check Number ONLINE



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee CITIZENS FOR CHRIS SHAW			
To Whom Paid FRIENDS OF MATT JOSEPH		Date (MM/DD/YYYY) 09/05/2019	Amount 75.00
Street Address 443 E. SIXTH ST		Purpose REIMBURSEMENT FOR SHARED EXPENSE	
City DAYTON	State OH	Zip Code 45402	Check Number 150
To Whom Paid BLACK ELECTED OFFICIALS GALA		Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Street Address PO BOX 61044		Purpose PROGRAM ADD	
City DAYTON	State OH	Zip Code 45406	Check Number 151
To Whom Paid JM²		Date (MM/DD/YYYY) 09/13/2012	Amount 620.00
Street Address 6919 LINBROOK BLVD		Purpose ABSENTEE CHASE POSTCARDS	
City COLUMBUS	State OH	Zip Code 43235	Check Number 152
To Whom Paid JM²		Date (MM/DD/YYYY) 9/24/19	Amount 2,067.17
Street Address 6919 LINBROOK BLVD		Purpose MAIL PIECES	
City COLUMBUS	State OH	Zip Code 43235	Check Number 153
To Whom Paid MONTGOMERY COUNTY DEMOCRATIC PARTY		Date (MM/DD/YYYY) 09/24/2019	Amount 1,725.00
Street Address 313 S. JEFFERSON ST		Purpose CONTRIBUTION	
City DAYTON	State OH	Zip Code 45402	Check Number 154

Page Total \$ **4527.17**



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee CITIZENS FOR CHRIS SHAW				
To Whom Paid MY CAMPAIGN STORE		Date (MM/DD/YYYY) 09/20/2019	Amount 752.38	
Street Address 304 WHITTINGTON PKWY STE 201		Purpose YARD SIGNS		
City LOUISVILLE	State OH Ky	Zip Code 40222	Check Number DEBIT CARD	
To Whom Paid MONTGOMERY CO. DEMOCRATIC PARTY		Date (MM/DD/YYYY) 10/01/2019	Amount 4,075.00	
Street Address 313 S. JEFFERSON ST		Purpose MAILED PEICE AND POSTAGE		
City DAYTON	State OH	Zip Code 45402	Check Number .155	
To Whom Paid COCO'S BISTRO		Date (MM/DD/YYYY) 09/05/19	Amount 569.18	
Street Address 250 WARREN ST		Purpose FUND RAISEN		
City DAYTON	State OH	Zip Code 45402	Check Number 149	
To Whom Paid ACT BLUE		Date (MM/DD/YYYY) 09/05/2019	Amount 9.38	
Street Address PO Box 441146		Purpose SERVICE FEE		
City SOMMERVILLE	State OH MA	Zip Code 02144	Check Number ONLINE	
To Whom Paid FRIENDS OF MATT JOSEPH		Date (MM/DD/YYYY) 10/3/2019	Amount 87.50	
Street Address 443 E. SIXTH ST		Purpose REIMBURSEMENT OF EXPENSES (SHARED)		
City DAYTON	State OH	Zip Code 45402	Check Number 158	

Page Total \$ **5493.44**



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee CITIZENS FOR CHRIS SHAW				
To Whom Paid BLACK ELECTED OFFICIALS		Date (MM/DD/YYYY) 10/1/2019		Amount 400.00
Street Address PO Box 61044		Purpose DONATION		
City DAYTON	State OH	Zip Code 45406	Check Number 156	
To Whom Paid JM ²		Date (MM/DD/YYYY) 10/03/2019		Amount 2114.00
Street Address 6919 LINBROOK BLVD		Purpose MAILED AND POSTAGE		
City Columbus	State OH	Zip Code 43235	Check Number 159	
To Whom Paid COMMITTEE TO REELECT JEFFREY MIMS		Date (MM/DD/YYYY) 10/1/2019		Amount 155.00 55.00
Street Address 531 BELMONT PARK N.		Purpose CONTRIBUTION		
City DAYTON	State OH	Zip Code 45405	Check Number 157	
To Whom Paid MONTGOMERY COUNTY DEMOCRATIC PARTY		Date (MM/DD/YYYY) 10/05/2019		Amount 4,011.75
Street Address 313 S. JEFFERSON ST		Purpose RADIO ADS		
City DAYTON	State OH	Zip Code 45402	Check Number 160	
To Whom Paid VANTIV E COMMERCE		Date (MM/DD/YYYY)		Amount 14.53
Street Address 8500 GOVERNORS HILL DR		Purpose SERVICE FEE		
City Symms Township	State OH	Zip Code 45249	Check Number ONLINE	

Page Total \$ 6595.28



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee CITIZENS FOR CHRIS SHAW				
To Whom Paid MONTGOMERY DAYTON COUNTY DEMOCRATIC PARTY		Date (MM/DD/YYYY) 10/08/2019		Amount 2000.00
Street Address 313 S. JEFFERSON ST		Purpose CAMPAIGN LITERATURE REIMBURSEMENT		
City DAYTON	State OH	Zip Code 45402	Check Number 161	
To Whom Paid PRO STAFF GRAPHICS		Date (MM/DD/YYYY) 10/10/2019		Amount 290.25
Street Address 21 W. MAIN ST		Purpose CAMPAIGN ENVELOPES		
City NEW LEBANON	State OH	Zip Code 45345	Check Number 162	
To Whom Paid FRIENDS OF MATT JOSEPH		Date (MM/DD/YYYY) 10/10/2019		Amount 50.00
Street Address 443 E. SIXTH ST		Purpose REIMBURSEMENT FOR DATC ADD(JOINT)		
City DAYTON	State OH	Zip Code 45402	Check Number 163	
To Whom Paid CARMEN GAINES		Date (MM/DD/YYYY) 10/10/2019		Amount 75.85
Street Address 531 BELMONT PARK W		Purpose REIMBURSEMENT FOR WEB EXPENSES		
City DAYTON	State OH	Zip Code 45405	Check Number 165	
To Whom Paid FRIENDS OF MATT JOSEPH		Date (MM/DD/YYYY) 10/10/2019		Amount 130
Street Address 443 E. SIXTH ST		Purpose REIMBURSEMENT FOR SHARE OF EVENT MAILING		
City DAYTON	State OH	Zip Code 45402	Check Number 164	

Page Total \$

2546.10



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee CITIZENS FOR CHRIS SHAW			
To Whom Paid DAYTON UNIT NAACP		Date (MM/DD/YYYY) 10/11/2019	Amount 575.00
Street Address 1528 W THIRD ST		Purpose FREEDOM FUND BANQUET, ADDITIONAL ADD BUY	
City DAYTON	State OH	Zip Code 45402	Check Number 166
To Whom Paid DAYTON WEEKLY NEWS		Date (MM/DD/YYYY) 10/11/2019	Amount 87.50
Street Address 1501 N. MAIN ST		Purpose ADD BUY	
City DAYTON	State OH	Zip Code 45405	Check Number 167
To Whom Paid DOROTHY LANE MARKET		Date (MM/DD/YYYY) 10/11/2019	Amount 11.00
Street Address 2710 FAR HILLS AVE		Purpose POSTAGE STAMPS	
City OAKWOOD	State OH	Zip Code 45409	Check Number CREDIT CARD
To Whom Paid ST BENEDICT THE MOON CHURCH		Date (MM/DD/YYYY) 10/13/2019	Amount 100.00
Street Address 519 LISCOM DR		Purpose DONATION	
City DAYTON	State OH	Zip Code 45405	Check Number 168
To Whom Paid FACEBOOK ADDS		Date (MM/DD/YYYY) 10/13/2019	Amount 25.00
Street Address 1 HACKER WAY		Purpose ADD ON FACEBOOK	
City MENLO PARK	State CA	Zip Code 94025	Check Number CREDIT CARD

Page Total \$ 798.50



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee

CITIZENS FOR CHRIS SHAW

To Whom Paid

MONTGOMERY COUNTY DEMOCRATIC PARTY

Date (MM/DD/YYYY)

10/16/2019

Amount

2025.00

Street Address

313 S. JEFFERSON ST

Purpose

MAIL PRICE AND POSTAGE

City

DAYTON

State

OH

Zip Code

45402

Check Number

169

To Whom Paid

JM²

Date (MM/DD/YYYY)

10/16/2019

Amount

2084.88

Street Address

6919 LINBROOK BLVD

Purpose

MAIL PIECE

City

COLUMBUS

State

OH

Zip Code

43235

Check Number

170

To Whom Paid

FACE BOOK ADS

Date (MM/DD/YYYY)

10/16/2019

Amount

1739

Street Address

1 HACKER WAY

Purpose

AD ON FACEBOOK

City

MENLOW PARK

State

CA

Zip Code

94025

Check Number

CREDITCARD

To Whom Paid

Date (MM/DD/YYYY)

Amount

Street Address

Purpose

City

State

OH

Zip Code

Check Number

To Whom Paid

Date (MM/DD/YYYY)

Amount

Street Address

Purpose

City

State

OH

Zip Code

Check Number

Page Total \$ 4127.27

Statement of Expenses

Form 100-1

Form 100-1

Full Name of Contributor

Address

City

State

Zip

Occupation

Employer

Phone

Account Number

Check

Amount

Date

Signature

Witness

Notary

Comments



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee

CITIZENS FOR CHRIS SHAW

Full Name of Contributor COCO'S BISTRO	Employer, Occupation, Labor Organization*	Registration Number, if PAC
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Street Address 250 WARREN ST	Description of Item or Service FOOD AT FUND RAISER	Date (MM/DD/YYYY) 09/05/2019	Fair Market Value 251.55
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City Dayton	State OH	Zip Code 45402	Received at Fundraising Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
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Street Address	Description of Item or Service	Date (MM/DD/YYYY)	Fair Market Value
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City	State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
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Street Address	Description of Item or Service	Date (MM/DD/YYYY)	Fair Market Value
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City	State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
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Street Address	Description of Item or Service	Date (MM/DD/YYYY)	Fair Market Value
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City	State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
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Street Address	Description of Item or Service	Date (MM/DD/YYYY)	Fair Market Value
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City	State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> No
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* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and 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)]

