



TURNER-SLOSS

Ohio Campaign Finance Report

Form 30-A
ORC 3517.10

Committee Name <i>FRIENDS of Sherise TURNER SLOSS</i>		Office Sought <i>City Commission</i>		District
Street Address <i>162 Oxford Ave</i>		City <i>DAYTON</i>	State <i>OH</i>	Zip <i>45402</i>
Candidate Name OR PAC Registration Number <i>Sherise TURNER SLOSS</i>		Treasurer Name <i>PAULA EWERS</i>		Election Date (MM/DD/YYYY) <i>11-05-2019</i>
Type of Report (choose one): ☐ Annual ☐ Semiannual ☐ Pre-Primary ☐ Post-Primary ☒ Pre-General ☐ Post-General				
Statewide Candidates Only: ☐ July Monthly ☐ August Monthly ☐ September Monthly				
Amended Report ☐ No ☒ Yes		Termination ☐ Check this box if the committee wishes to terminate with this report		Short Form Report (R.C. 3517.10(H)) ☐ Check this box if the committee is filing a short term report. See attached instructions.

1. Amount brought forward from last report	1548.36
2. Total monetary contributions (From Forms 31-A and 31-E)	12682.35
3. Total other income (From Form 31-A-2)	
4. Total funds available (sum of lines 1, 2, and 3)	14230.71
5. Total monetary expenditures (From Forms 31-B and 31-F)	4868.19
6. Balance on hand (line 4 minus line 5)	9362.52
7. Value of in-kind contributions received (From Form 31-J-1)	
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)	

BOARD OF ELECTIONS
MONTGOMERY COUNTY, OHIO

2019 OCT 24, PM 3:57

RECEIVED

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

Paula Ewers
Signature of Treasurer or Deputy Treasurer

10-24-2019
Date (MM/DD/YYYY)

Contribution Pages
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Expenditure Pages
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Other Pages
4

Total Pages
23



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee <i>FRIENDS of Shenise TURNER Sloss</i>				
Full Name of Contributor <i>SEE ATTACHED SHEET</i>			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State ▼	Zip Code	Date (MM/DD/YYYY)	Amount <i>9285.00</i>
Full Name of Contributor <i>CONTRIBUTIONS from Form 31-E</i>			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State ▼	Zip Code	Date (MM/DD/YYYY) <i>08-05-2019</i>	Amount <i>1043.35</i>
Full Name of Contributor <i>CONTRIBUTIONS from Form 31-E</i>			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State ▼	Zip Code	Date (MM/DD/YYYY) <i>08-29-2019</i>	Amount <i>1439.00</i>
Full Name of Contributor <i>CONTRIBUTIONS from Form 31-E</i>			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State ▼	Zip Code	Date (MM/DD/YYYY) <i>09/29/2019</i>	Amount <i>915.00</i>
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

*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)]

10:25 PM

10/23/19

Accrual Basis

Friends of S. Turner-Sloss Contributions June 8 through October 16, 2019

Type	Date	Name	Name Address	Amount
Income				
200 - Contributions				
Deposit	07/12/2019	Christian, Eric & Tamara	5702 Brennan Dr Colorado Springs, CO 80923	200.00
Deposit	07/12/2019	Greer, David	344 Middle St Dayton OH 45402	25.00
Deposit	07/23/2019	Garrison, Jamica	818 Meredith St Dayton OH 45402	225.00
Deposit	07/23/2019	Shackleford, Marlon	513 Fredericksburg Dr Dayton OH 45415	50.00
Deposit	08/04/2019	Gmeiner, Mary Sue	1418 Arbor Ave Dayton OH 45420	100.00
Deposit	08/04/2019	Watson, Joni	2432 Westlawn Dr Dayton OH 45440	50.00
Deposit	08/04/2019	Lauri, David	2230 S Patterson Blvd Dayton OH 45409	25.00
Deposit	08/04/2019	McFarland, LaToya	4135 Fer Don Rd Dayton OH 45405	50.00
Deposit	08/04/2019	Korb, Amanda	116 Park Dr Dayton OH 45410	50.00
Deposit	08/04/2019	Bohler, Carolyn	111 Harries St #208 Dayton OH 45402	20.00
Deposit	08/04/2019	Wallace, John R.	1418 Arbor Ave Dayton OH 45420	400.00
Deposit	08/05/2019	The Patriots-PAC OH 1761	c/o Perfect Balance CPA 2470 E Main St Columbus ...	2,000.00
Deposit	08/05/2019	Dugger, Sharon	1503 Miami Chapel Rd Dayton OH 45417	25.00
Deposit	08/07/2019	McKenzie, Brian	4109 Meadowvale Dr Dayton OH 45416	50.00
Deposit	08/13/2019	McKenzie, Brian	4109 Meadowvale Dr Dayton OH 45416	50.00
Deposit	08/22/2019	Sibbing, William	475 Elm Grove Dr Dayton OH 45415	150.00
Deposit	08/23/2019	Coleman, William	608 Hampshire Rd #6 Dayton OH 45406	35.00
Deposit	09/04/2019	Jordan, Mona	3272 Garvin Rd Dayton OH 45405	50.00
Deposit	09/04/2019	Starks-Daniels, Allyse	339 Lemery Dr Columbus OH 43213	50.00
Deposit	09/05/2019	Righter, Richard L.	1800 Litchfield Ave Dayton OH 45406	2,000.00
Deposit	09/30/2019	Snow, Monica M.	426 E 6th St Dayton OH 45402	500.00
Deposit	09/30/2019	Granzow, Joanne	N/A	100.00
Deposit	09/30/2019	John, Jeffrey A.	122 Brown St Dayton OH 45402	50.00
Deposit	09/30/2019	Youngkin, Betty R.	1644 S Main St Dayton OH 45409	200.00
Deposit	09/30/2019	Molnar, Michael	1220 Steinbeckway A Fairborn OH 45324	100.00
Deposit	10/04/2019	The Patriots-PAC OH 1761	c/o Perfect Balance CPA 2470 E Main St Columbus ...	1,000.00
Deposit	10/04/2019	Wortham, Maurice	3928 Cone Ct Dayton OH 45417	100.00
Deposit	10/04/2019	Wortham, John	3928 Cone Ct Dayton OH 45417	100.00
Deposit	10/12/2019	Iron Workers Local 290 PCE	4191 E US Route 40 Tipp City OH 45371	200.00
Deposit	10/12/2019	Wilson, Galen R.	130 Alberta St Dayton OH 45410	100.00
Deposit	10/12/2019	Holly, Tracy	1630 Ruskin Rd Dayton OH 45406	100.00
Deposit	10/12/2019	Mayes, Frances H	1731 Alamo Ct Dayton OH 45417	50.00
Deposit	10/12/2019	Melson, Dr. Connie E	7433 Country Brook Ct Dayton OH 45414	100.00
Deposit	10/12/2019	McGill, Mildred A.	4219 Merryfield Ave Dayton OH 45416	25.00
Deposit	10/12/2019	Gerren, Lucie Gaye	2803 Forest Grove Dayton OH 45406	60.00
Deposit	10/12/2019	Pouce, Michel	438 Anna St Dayton OH 45417	100.00
Deposit	10/16/2019	Cain, Erica	1687 Cory Dr Dayton OH 45406	50.00
Deposit	10/16/2019	Cartwright, TeJal	1161 Normdave Dr Dayton OH 45417	25.00
Deposit	10/16/2019	David, Kym	2728 Della Dr Dayton OH 45417	50.00
Deposit	10/16/2019	Bohler, Carolyn	111 Harries St #208 Dayton OH 45402	20.00
Deposit	10/16/2019	Robinson, Thomas	N/A	200.00
Deposit	10/16/2019	Wendeln, Ted	9205 Great Lakes Cr Centerville OH 45458	250.00
Deposit	10/16/2019	Patrick, Kiya	6471 Noranda Dr Dayton OH 45415	100.00
Deposit	10/16/2019	Mayo, Lori	1956 Burbank Dr Dayton OH 45406	50.00
Deposit	10/16/2019	Turner, Crystal	1010 Ebony Lane Cincinnati OH 45224	50.00
Total 200 - Contributions				9,285.00
Total Income				9,285.00
Expense				



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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee <i>FRIENDS of Shenise TURNER Sloss</i>				
Full Name of Contributor <i>John R. WALLACE</i>			Registration Number, if PAC	
Street Address <i>1418 ARBOR Ave</i>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <i>08/05/2019</i>	Amount <i>100.00</i>
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45420</i>	Form (Cash, Check, Etc) <i>check</i>	
Full Name of Contributor <i>Lynne Wise</i>			Registration Number, if PAC	
Street Address <i>725 LARRIWOOD Ave</i>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <i>08/05/2019</i>	Amount <i>40.00</i>
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45429</i>	Form (Cash, Check, Etc) <i>check</i>	
Full Name of Contributor <i>INDIVIDUALS less than \$20⁰⁰ each</i>			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <i>08/05/2019</i>	Amount <i>903.35</i>
City	State <i>OH</i>	Zip Code	Form (Cash, Check, Etc) <i>CASH</i>	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
City	State	Zip Code	Form (Cash, Check, Etc)	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
City	State	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
1043.35

Total Expenditures This Event
183.43

Page Total \$ 1043.35



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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee <i>FRIENDS of Sherise TURNER Sloss</i>				
Full Name of Contributor <i>See ATTACHED sheet</i>			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount <i>1439.00</i>
City		State OH	Zip Code	Form (Cash, Check, Etc)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount
City		State OH	Zip Code	Form (Cash, Check, Etc)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount
City		State OH	Zip Code	Form (Cash, Check, Etc)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount
City		State OH	Zip Code	Form (Cash, Check, Etc)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount
City		State OH	Zip Code	Form (Cash, Check, Etc)

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Total Contributions This Event
1439.00

Total Expenditures This Event
463.46

Page Total \$ *1439.00*

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10/23/19

Accrual Basis

Friends of S. Turner-Sloss
Profit & Loss Detail
 August 6 - 30, 2019

Type	Date	Name	Name Address	Amount
Income				
250 · Fundraiser Income				
Deposit	08/23/2019	Shannon, Crystal	1010 Ebony Lane Cincinnati OH 45224-2765	15.00
Deposit	08/26/2019	Lewis, Brandon	4614 Kuendinger Ave Dayton OH 45417	30.00
Deposit	08/27/2019	Whitmore, Anthony B.	6604 loblolly Dr Dayton OH 45424-6501	300.00
Deposit	08/27/2019	Hayashi, Donald	1133 Woodland Meadows Dr Vandalia OH 45377	100.00
Deposit	08/27/2019	Majka, Dr. Theo J.	117 Otterbein Ave Dayton OH 45406	30.00
Deposit	08/28/2019	Gaspar, Theresa	2130 Hedge Gate Blvd Dayton OH 45431	100.00
Deposit	08/28/2019	Berry, Danya		10.00
Deposit	08/28/2019	Dennis, Andretta	6594 Stillcrest Way Dayton OH 45414	100.00
Deposit	08/28/2019	Diggs, Frederick	6201 Philadelphia Dr Dayton OH 45415-2657	100.00
Deposit	08/28/2019	McClendon, Linda		5.00
Deposit	08/28/2019	Alexander, Ray	6031 Rangeview Dr Dayton OH 45415	50.00
Deposit	08/28/2019	Berry, Michele	120 Grandon Rd Dayton OH 45419	54.00
Deposit	08/28/2019	Brookshire, Jillian	8071 Mount AetnaSt Dayton OH 45424	20.00
Deposit	08/28/2019	Clark, Martha	4439 Filbrun La Dayton OH 45426	50.00
Deposit	08/30/2019	Bradley, Rosalee D.	5280 Torch Ln Dayton OH 45417-8843	50.00
Deposit	08/30/2019	Boomershine, Amelia Cooper	620 W Nottingham Rd Dayton OH 45405	50.00
Deposit	08/30/2019	Nelson, Michael R.	327 Sandalwood Dr Dayton OH 45405-2924	100.00
Deposit	08/30/2019	cash	<i>Less Than 25 each</i>	275.00
Total 250 · Fundraiser Income				1,439.00
Total Income				1,439.00
Expense				
Net Income				1,439.00



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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee <i>FRIENDS of Sherice TURNER Stoss</i>				
Full Name of Contributor <i>See ATTACHED sheet</i>			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)
				Amount <i>915.00</i>
City		State ▼	Zip Code	Form (Cash, Check, Etc)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)
				Amount
City		State ▼	Zip Code	Form (Cash, Check, Etc)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)
				Amount
City		State ▼	Zip Code	Form (Cash, Check, Etc)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)
				Amount
City		State ▼	Zip Code	Form (Cash, Check, Etc)
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)
				Amount
City		State ▼	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
915.00

Total Expenditures This Event
52.10

Page Total \$ *915.00*

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10/23/19

Accrual Basis

Friends of S. Turner-Sloss
Profit & Loss Detail
 October 4 - 16, 2019

Type	Date	Name	Name Address	Amount
Income				
250 · Fundraiser Income				
Deposit	10/04/2019	cash		125.00
Deposit	10/04/2019	Maxwell, Tomasina L.	4205 Cape Cod Ct Dayton OH 45406	100.00
Deposit	10/04/2019	Taylor, Mary E	425 Dayton Towers Dr L4 Dayton OH 45410	100.00
Deposit	10/04/2019	Duncan, Valerie N.	1401 Arbor Ave Dayton OH 45420	100.00
Deposit	10/04/2019	Arnold, Marsha E.	3215 Forest Grove Ave Dayton OH 45406	20.00
Deposit	10/04/2019	Enyart, Melville E.	609 Kings Cross Ct Dayton OH 45449	25.00
Deposit	10/04/2019	Thomas, Maggie N.	5866 Woodstone Dayton OH 45426	25.00
Deposit	10/04/2019	Smothers, Roane D.	111 N patterson Blvd Dayton OH 45402	25.00
Deposit	10/04/2019	Day, Patricia Allen	2255 Settlers Trail Vandalia OH 45377	100.00
Deposit	10/04/2019	Montgomery, Elvira H.	2025 Shaftesbury Rd Dayton OH 45406-3819	50.00
Deposit	10/04/2019	Depp, Arnetta	3110 Forest Grove Ave Dayton OH 45406	50.00
Deposit	10/04/2019	Schnering, Dorothy	1432 E Fourth St Dayton OH 45402	50.00
Deposit	10/12/2019	cash		15.00
Deposit	10/16/2019	Forte, Khalilah		10.00
Deposit	10/16/2019	Hamilton, Kathleen	440 Dayton Towers Dr Apt Dayton OH 45410	10.00
Deposit	10/16/2019	Townes, Kathleen		20.00
Deposit	10/16/2019	Brown, Penelope	4140 Free Pike Dayton OH 45416	10.00
Deposit	10/16/2019	McLemore, Adrian		10.00
Deposit	10/16/2019	Sensible Strands Beauty Supply		20.00
Deposit	10/16/2019	Stark, Rodney		20.00
Deposit	10/16/2019	Johnson, LaTonya	630 Oakleaf Dr Dayton OH 45417	20.00
Deposit	10/16/2019	Sutton, Sue		10.00
Total 250 · Fundraiser Income				915.00
Total Income				915.00
Expense				
Net Income				915.00



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee <i>FRIENDS of Sherise TURNER Sloss</i>				
To Whom Paid <i>EXPENDITURES from Form 31-F</i>		Date (MM/DD/YYYY) <i>08/05/2019</i>		Amount <i>183.43</i>
Street Address		Purpose		
City	State <i>OH</i>	Zip Code		Check Number
To Whom Paid <i>EXPENDITURES from Form 31-F</i>		Date (MM/DD/YYYY) <i>08-29-2019</i>		Amount <i>463.46</i>
Street Address		Purpose		
City	State <i>OH</i>	Zip Code		Check Number
To Whom Paid <i>EXPENDITURES from FUND RAISER</i>		Date (MM/DD/YYYY) <i>09/29/2019</i>		Amount <i>52.10</i>
Street Address		Purpose		
City	State <i>OH</i>	Zip Code		Check Number
To Whom Paid <i>DARIA LOUe</i>		Date (MM/DD/YYYY) <i>06/22/2019</i>		Amount <i>25.00</i>
Street Address <i>4125 Fleetwood Dr</i>		Purpose <i>Design poster/flyer</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45416</i>		Check Number <i>Debit</i>
To Whom Paid <i>MAIL CHIMP c/o the Rocket Science Group, LLC</i>		Date (MM/DD/YYYY) <i>07/21/2019</i>		Amount <i>53.74</i>
Street Address <i>675 Ponce de Leon Ave NE - Ste 5000</i>		Purpose <i>EMAIL Blasts</i>		
City <i>ATLANTA</i>	State <i>GA</i>	Zip Code <i>30308</i>		Check Number <i>Debit</i>

Page Total \$ 777.73



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee FRIENDS of Sherise Turner Sloss			
To Whom Paid The Next Wave		Date (MM/DD/YYYY) 07/16/2019	Amount 1000.00
Street Address 100 BONNER ST		Purpose Printing	
City Dayton	State OH	Zip Code 45410	Check Number 1008
To Whom Paid WORLD Digital Imaging		Date (MM/DD/YYYY) 07/25/2019	Amount 66.61
Street Address 1138 Richfield Center		Purpose MAIL Merge ABILITY	
City Dayton	State OH	Zip Code 45430	Check Number Debit
To Whom Paid The Next Wave		Date (MM/DD/YYYY) 08/04/2019	Amount -1.00
Street Address 100 Bonner ST		Purpose Overpaid refund	
City Dayton	State OH	Zip Code 45410	Check Number ACH
To Whom Paid YLAG - Shirello STROUD		Date (MM/DD/YYYY) 08/10/2019	Amount 100.00
Street Address 3389 Brombaugh Blvd		Purpose Ticket and Ad for YLAG GALA	
City Dayton	State OH	Zip Code	Check Number CASH APP
To Whom Paid MAIL Chimp - c/o The Rocket Science Group LLC		Date (MM/DD/YYYY) 08/21/2019	Amount 53.74
Street Address 675 Ponce de Leon Ave NE Ste 5000		Purpose Email Blasts	
City ATLANTA	State GA	Zip Code 30308	Check Number Debit

Page Total \$ 1219.35



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee FRIENDS of Shenise TURNER Sloss			
To Whom Paid TWENTIG, INC		Date (MM/DD/YYYY) 09/05/2019	Amount 25.00
Street Address		Purpose Ad for Twentig 43rd Anniversary Booklet	
City	State OH	Zip Code	Check Number Debit
To Whom Paid World Digital Imaging		Date (MM/DD/YYYY) 09/05/2019	Amount 64.03
Street Address 1138 Richfield Center		Purpose Letters/Envelopes Printed	
City Dayton	State OH	Zip Code 45430	Check Number Debit
To Whom Paid The NEXT WAVE		Date (MM/DD/YYYY) 09/06/2019	Amount 440.02
Street Address 100 Bonner ST		Purpose PRINT + do CAR Magnets	
City Dayton	State OH	Zip Code 45410	Check Number Debit
To Whom Paid United States Post Office		Date (MM/DD/YYYY) 09/10/2019	Amount 106.00
Street Address 1111 E 5th ST		Purpose STAMPS	
City Dayton	State OH	Zip Code 45401	Check Number Debit
To Whom Paid SAM'S CLUB		Date (MM/DD/YYYY) 09/12/2019	Amount 21.82
Street Address 3446 Pentagon Blvd		Purpose Supplies for Candidate's Night	
City Beavercreek	State OH	Zip Code 45431	Check Number Debit

Page Total \$ **656.87**



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee FRIENDS of Sherise TURNER Sloss			
To Whom Paid Omega Baptist Retirement GALA		Date (MM/DD/YYYY) 09/20/2019	Amount 30.00
Street Address 1821 Emerson Ave		Purpose Ticket for the Gala	
City Dayton	State OH	Zip Code 45406	Check Number Debit
To Whom Paid MAIL Chimp - 40 the Rocket Science Group, LLC		Date (MM/DD/YYYY) 09/21/2019	Amount 53.74
Street Address 675 Ponce de Leon Ave NE - Suite 5000		Purpose email Blasts	
City Atlanta	State GA	Zip Code 30308	Check Number Debit
To Whom Paid 24 Hour WRISTBANDS.com		Date (MM/DD/YYYY) 09/12/2019	Amount 100.50
Street Address Web site - 24 HOUR WRISTBANDS.COM		Purpose WRISTBAND	
City	State OH	Zip Code	Check Number Debit
To Whom Paid 24 Hour WRISTBANDS.com		Date (MM/DD/YYYY) 10/12/2019	Amount -15.00
Street Address Web site as above		Purpose Refund on overcharge of above purchase	
City	State OH	Zip Code	Check Number ACH
To Whom Paid United STATES Post Office		Date (MM/DD/YYYY) 09/30/2019	Amount 165.00
Street Address 1111 E 5th ST		Purpose STAMPS	
City Dayton	State OH	Zip Code 45401	Check Number Debit

Page Total \$ 334.24



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee FRIENDS of Sherise Turner Sloss			
To Whom Paid PRICELINE/Courtyards by MARRIOTT		Date (MM/DD/YYYY) 08/10/2019	Amount 149.97
Street Address 2021 Cornell Rd		Purpose For Sherise Turner Sloss Lodging while at Campaign Finance Course in Cleveland	
City Cleveland	State OH	Zip Code 44106	Check Number Debit
To Whom Paid UNITED STATES POST OFFICE		Date (MM/DD/YYYY) 10/09/2019	Amount 105.00
Street Address 1111 E 5 th ST		Purpose STAMPS	
City Dayton	State OH	Zip Code 45401	Check Number Debit
To Whom Paid World Digital Imaging		Date (MM/DD/YYYY) 09/25/2019	Amount 175.95
Street Address 1138 Richfield Center		Purpose Printing	
City Dayton	State OH	Zip Code 45430	Check Number Debit
To Whom Paid WALMART		Date (MM/DD/YYYY) 10/04/2019	Amount 92.21
Street Address 3360 Pentagon Blvd		Purpose INK CARTRIDGES for Printing Absentee Mailer	
City Beavercreek	State OH	Zip Code 45431	Check Number Debit
To Whom Paid NAACP - DAYTON UNIT		Date (MM/DD/YYYY) 10/04/2019	Amount 150.00
Street Address 1528 W 3 rd ST		Purpose AD + Ticket to NAACP GALA	
City Dayton	State OH	Zip Code 45402	Check Number checking Cash w/d

Page Total \$ 673.13



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee <i>FRIENDS of Sherise TURNER Sloss</i>				
To Whom Paid <i>Putting Women in their Place, Inc</i>		Date (MM/DD/YYYY) <i>10/05/2019</i>		Amount <i>195.00</i>
Street Address <i>1331 Gloss Ave</i>		Purpose <i>Video Services</i>		
City <i>CINCINNATI</i>	State <i>OH</i>	Zip Code <i>45213</i>	Check Number <i>Debit</i>	
To Whom Paid <i>The Next Wave</i>		Date (MM/DD/YYYY) <i>10/05/2019</i>		Amount <i>400.00</i>
Street Address <i>100 Bonner ST</i>		Purpose <i>Printing</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45410</i>	Check Number <i>Debit</i>	
To Whom Paid <i>United States Post Office</i>		Date (MM/DD/YYYY) <i>10/11/2019</i>		Amount <i>105.00</i>
Street Address <i>1111 E 5th ST</i>		Purpose <i>STAMPS</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45401</i>	Check Number <i>Debit</i>	
To Whom Paid <i>Office Depot</i>		Date (MM/DD/YYYY) <i>10/11/2019</i>		Amount <i>26.69</i>
Street Address <i>3340 Pentagon Blvd</i>		Purpose <i>MAILERS for Absentees</i>		
City <i>Bevercreek</i>	State <i>OH</i>	Zip Code <i>45431</i>	Check Number <i>debit</i>	
To Whom Paid <i>Dominos Pizza</i>		Date (MM/DD/YYYY) <i>09/12/2019</i>		Amount <i>27.98</i>
Street Address <i>3512 W. Siebenhaler</i>		Purpose <i>Food for Planning Committee</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45406</i>	Check Number <i>Debit</i>	

Page Total \$ 754.67



Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee <i>FRIENDS of Sherise Turner Sloss</i>				
To Whom Paid <i>The NEXT WAVE</i>		Date (MM/DD/YYYY) <i>10/11/2019</i>		Amount <i>199.25</i>
Street Address <i>100 Bonner ST</i>		Purpose <i>PRINTING</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45410</i>	Check Number <i>Debit</i>	
To Whom Paid <i>PAY PAL</i>		Date (MM/DD/YYYY) <i>10/15/2019</i>		Amount <i>102.95</i>
Street Address <i>PAY PAL - Com</i>		Purpose <i>Accumulated charges for each donation - see attachment</i>		
City	State <i>OH</i>	Zip Code	Check Number	
To Whom Paid <i>CASH - we are contesting this</i>		Date (MM/DD/YYYY) <i>10/04/2019</i>		Amount <i>150⁰⁰</i>
Street Address <i>Withdrawal with the Bank</i>		Purpose		
City	State <i>OH</i>	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State <i>OH</i>	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State <i>OH</i>	Zip Code	Check Number	

Page Total \$ *452.20*
~~*302.20*~~



Statement of Expenditures for Social or Fund-Raising Event

Form 31-F
R.C. 3517.10

Full Name of Committee <i>FRIENDS of Shenise TURNER Sloss</i>				
To Whom Paid <i>Curtis MANN III</i>		Date (MM/DD/YYYY) <i>04/18/2019</i>		Amount <i>25.00</i>
Street Address <i>1457 VANCOUVER DR</i>		Purpose <i>Design Ad for Fish Fry</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45406</i>	Check Number <i>Debit</i>	
To Whom Paid <i>SAM'S Club</i>		Date (MM/DD/YYYY) <i>07/20/2019</i>		Amount <i>94.37</i>
Street Address <i>3446 Pentagon Blvd</i>		Purpose <i>Food/supplies for Fish Fry</i>		
City <i>Beavercreek</i>	State <i>OH</i>	Zip Code <i>45431</i>	Check Number <i>Debit</i>	
To Whom Paid <i>KROGER</i>		Date (MM/DD/YYYY) <i>07-20-2019</i>		Amount <i>28.06</i>
Street Address <i>3520 W. Siebenthaler Ave</i>		Purpose <i>Food/supplies for Fish Fry</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45406</i>	Check Number	
To Whom Paid <i>GFS</i>		Date (MM/DD/YYYY) <i>07-21-2019</i>		Amount <i>36.00</i>
Street Address <i>2943 HARSHMAN RD</i>		Purpose <i>Food for Fish Fry</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45424</i>	Check Number <i>Debit</i>	
To Whom Paid <i>...</i>		Date (MM/DD/YYYY) <i>06/08/2019</i>		Amount <i>25.00</i>
Street Address <i>...</i>		Purpose <i>...</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>...</i>	Check Number <i>Debit</i>	

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

Page Total \$ 183.43



Statement of Expenditures for Social or Fund-Raising Event

Form 31-F
R.C. 3517.10

Full Name of Committee <i>FRIENDS of Shenise TURNER Sloss</i>				
To Whom Paid <i>CURTIS MANN III</i>		Date (MM/DD/YYYY) <i>08/08/2019</i>		Amount <i>25.00</i>
Street Address <i>1457 VANCOUVER DR</i>		Purpose <i>Design Flyer for FUNDRAISER</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45406</i>	Check Number <i>Debit</i>	
To Whom Paid <i>SAM'S Club</i>		Date (MM/DD/YYYY) <i>08/21/2019</i>		Amount <i>34.80</i>
Street Address <i>3446 Pentagon Blvd</i>		Purpose <i>Food</i>		
City <i>Beavercreek</i>	State <i>OH</i>	Zip Code <i>45431</i>	Check Number <i>Debit</i>	
To Whom Paid <i>KROGER</i>		Date (MM/DD/YYYY) <i>08/21/2019</i>		Amount <i>11.31</i>
Street Address <i>3520 W. Siebenthaler Ave</i>		Purpose <i>Food</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45406</i>	Check Number <i>Debit</i>	
To Whom Paid <i>WhiteHouse Event Center</i>		Date (MM/DD/YYYY) <i>08/23/2019</i>		Amount <i>200⁰⁰</i>
Street Address <i>101 E Second ST</i>		Purpose <i>Rental of Room</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45402</i>	Check Number <i>Debit</i>	
To Whom Paid <i>GFS</i>		Date (MM/DD/YYYY) <i>08/23/2019</i>		Amount <i>12.35</i>
Street Address <i>2943 HARSHMAN RD</i>		Purpose <i>Supplies for Fund Raiser</i>		
City <i>Dayton</i>	State <i>OH</i>	Zip Code <i>45424</i>	Check Number	

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

Page Total \$ 283.46



Statement of Expenditures for Social or Fund-Raising Event

Form 31-F
R.C. 3517.10

Full Name of Committee <i>FRIENDS of Sherise TURNER Sloss</i>				
To Whom Paid <i>J W's WINE Cellar</i>		Date (MM/DD/YYYY) <i>08/24/2019</i>		Amount <i>80⁰⁰</i>
Street Address <i>724 E. MAIN ST</i>		Purpose <i>BOTTLES of WINE for FUNDRAISER</i>		
City <i>DAYTON</i>	State <i>OH</i>	Zip Code <i>45426</i>	Check Number <i>Debit</i>	
To Whom Paid <i>ANTHONY T. Head</i>		Date (MM/DD/YYYY) <i>08/26/2019</i>		Amount <i>100.00</i>
Street Address <i>3261 W. Siebenthaler Ave</i>		Purpose <i>Food Vendor</i>		
City <i>DAYTON</i>	State <i>OH</i>	Zip Code <i>45406</i>	Check Number <i>Debit / CASH APP</i>	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State	Zip Code	Check Number	

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

Page Total \$ 180.00



Statement of Expenditures for Social or Fund-Raising Event

Form 31-F
R.C. 3517.10

Full Name of Committee <i>FRIENDS of Sherise TURNER Sloss</i>				
To Whom Paid <i>WAL MART</i>		Date (MM/DD/YYYY) <i>09/22/2019</i>		Amount <i>46.11</i>
Street Address <i>3360 Pentagon Blvd</i>		Purpose <i>Supplies for FundRAISer</i>		
City <i>Bevercreek</i>	State <i>OH</i> ☐	Zip Code <i>45431</i>	Check Number <i>Debit</i>	
To Whom Paid <i>GFS</i>		Date (MM/DD/YYYY) <i>09/30/2019</i>		Amount <i>5.99</i>
Street Address <i>2943 HARSHMAN Rd</i>		Purpose <i>Supplies for FundRAISer</i>		
City <i>Dayton</i>	State <i>OH</i> ☐	Zip Code <i>45424</i>	Check Number <i>Debit</i>	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State ☐	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State ☐	Zip Code	Check Number	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State ☐	Zip Code	Check Number	

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

Page Total \$ 52.10