

30-A  
R.C. 3517.10

ANNUAL  
JAN 3 1 2018

# Ohio Campaign Finance Report

Prescribed by Secretary of State 2/01

|  |                                      |   |   |  |                            |                             |                          |   |
|--|--------------------------------------|---|---|--|----------------------------|-----------------------------|--------------------------|---|
| Full Name of Committee<br><b>NEIGHBORHOODS FOR DAYTON'S FUTURE</b>       |                                      |   |   |  |                            | Registration Number, if PAC |                          |   |
| Full Name of Candidate   |                                      |   |   |  |                            |                             |                          |   |
| Street Address<br><b>239 RAVENHILL CT</b>                                |                                      |   |   |  | Office Sought              |                             | District                 |   |
| City<br><b>DAYTON</b>  |                                      |   |   |  |                            | State<br><b>OH</b>          | Zip Code<br><b>45420</b> |   |
| Type of Report<br>(place X to the left of report type)                   | <input type="checkbox"/> Pre-Primary | <input type="checkbox"/> Post-Primary   | <input type="checkbox"/> Pre-General    | <input type="checkbox"/> Post-General      | Annual Year<br><b>2017</b> |                             |                          |   |
|  | <input type="checkbox"/> Special     | <input type="checkbox"/> July Monthly   | <input type="checkbox"/> August Monthly | <input type="checkbox"/> September Monthly | Termination                |                             |                          |   |
| Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      | Report Electronically Filed? <input type="checkbox"/> Yes <input type="checkbox"/> No |   | Date of Election                           |                            | M                           | D                        | Y |

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box  No other forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

|   |    |              |           |
|---|----|--------------|-----------|
| 1. Amount brought forward from last report  | \$ | <b>43038</b> | <b>65</b> |
| 2. Total monetary contributions (From Form No. 31-A)  | \$ |              |           |
| 3. Total other income (From Form No. 31-A-2)  | \$ |              |           |
| 4. Total funds available (sum of lines 1, 2, 3)   | \$ | <b>43038</b> | <b>65</b> |
| 5. Total monetary expenditures (From Form No. 31-B)   | \$ | <b>1373</b>  | <b>39</b> |
| 6. Balance on hand (line 4 minus line 5)  | \$ | <b>41665</b> | <b>26</b> |
| 7. Value of in-kind contributions received (From Form No. 31-J-1)   | \$ |              |           |
| 8. Value of in-kind contributions made (From Form No. 31-J-2)   | \$ |              |           |
| 9. Outstanding loans owed by committee (From Form No. 31-C)   | \$ |              |           |
| 10. Outstanding debts owed by committee (From Form No. 31-N)  | \$ |              |           |
| 11. Outstanding loans owed to committee (From Form No. 31-K)  | \$ |              |           |
| 12. Value of independent expenditures made (From Form No. 31-U)   | \$ |              |           |
| 13. For Electronic Filing Entities only<br>Sum of lines 2, 7, and amount of any new loans received this period. | \$ | <b>41665</b> | <b>26</b> |

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

Michael Voelkel  
Print Name and Title (Treasurer and Deputy Treasurer only)

[Signature]  
Signature

1-16-18  
Date

Contribution pages \_\_\_\_\_

Expenditure pages 1

Other pages \_\_\_\_\_

Total pages 2

# Statement of Expenditures

Prescribed by Secretary of State 2/01

|   |  |  |                    |                          |                             |                                   |   |   |        |
|---|--|--|--------------------|--------------------------|-----------------------------|-----------------------------------|---|---|--------|
| Name of Committee in Full<br><b>NEIGHBORHOOD FOR JAMES FUTURE</b> |  |  |                    |                          |                             |                                   |   |   |        |
| To Whom Paid<br><b>CODE CREDIT UNION</b>                          |  |  |                    |                          |                             | M                                 | D | Y | Amount |
| Address<br><b>355 W Monument</b>                                  |  |  |                    |                          |                             | Purpose<br><b>CREDIT CARD PMT</b> |   |   |        |
| City<br><b>DAYTON</b>   |  |  | State<br><b>OH</b> | Zip Code<br><b>45402</b> | Check Number<br><b>1576</b> |                                   |   |   |        |
| To Whom Paid<br><b>CODE CREDIT UNION</b>                          |  |  |                    |                          |                             | M                                 | D | Y | Amount |
| Address<br><b>355 MONUMENT</b>                                    |  |  |                    |                          |                             | Purpose<br><b>FEE</b>             |   |   |        |
| City<br><b>DAYTON</b>   |  |  | State<br><b>OH</b> | Zip Code<br><b>45402</b> | Check Number<br><b>1577</b> |                                   |   |   |        |
| To Whom Paid  |  |  |                    |                          |                             | M                                 | D | Y | Amount |
| Address   |  |  |                    |                          |                             | Purpose                           |   |   |        |
| City  |  |  | State              | Zip Code                 | Check Number                |                                   |   |   |        |
| To Whom Paid  |  |  |                    |                          |                             | M                                 | D | Y | Amount |
| Address   |  |  |                    |                          |                             | Purpose                           |   |   |        |
| City  |  |  | State              | Zip Code                 | Check Number                |                                   |   |   |        |
| To Whom Paid  |  |  |                    |                          |                             | M                                 | D | Y | Amount |
| Address   |  |  |                    |                          |                             | Purpose                           |   |   |        |
| City  |  |  | State              | Zip Code                 | Check Number                |                                   |   |   |        |
| To Whom Paid  |  |  |                    |                          |                             | M                                 | D | Y | Amount |
| Address   |  |  |                    |                          |                             | Purpose                           |   |   |        |
| City  |  |  | State              | Zip Code                 | Check Number                |                                   |   |   |        |
| To Whom Paid  |  |  |                    |                          |                             | M                                 | D | Y | Amount |
| Address   |  |  |                    |                          |                             | Purpose                           |   |   |        |
| City  |  |  | State              | Zip Code                 | Check Number                |                                   |   |   |        |