

Not an Original Document & Ohio Campaign Finance Report

JUL 28 2021

GREENE CO.

Form 30-A

ORC 3517.10

		FELECTIO	NS							
Committee Name	DONNO	S Dec Res son do s		Office Sought						District
Hayes for Prosecutor				Greene County Prosecutor				secutor		10th
Street Address		City State Zip								
2663 Cross Country Ro	oad	Beavercree	ek	OH 45431						
Candidate Name OR PAC						Election Date (M	M/DD/	YYY)		
David Dwayne Hayes Jeannette M. Adkins 11/03/2020										
Type of Report (cho	oose one):									
☐ Annual ⊠ Se	emiannual Pre-Primary	Post-Pr	rimary [Pre-	General		Pos	t-General		
Statewide Candidate	s Only:								Year	
☐ July Monthly [August Monthly Se	ptember Mont	thly						202	
Amended Report	Termination		Short F	Form Re	port (R.	.C. 351	7.10	D(H))		
⊠ No ☐ Yes	Check this box if the co		111					ee is filing a dinstructions.		
1. Amount broug	ht forward from last report			97.80 (includes	24.00	unr	econciled)		
2. Total monetary	contributions (From Forms	31-A and 31-	E)	1,000.00						
3. Total other inc	ome (From Form 31-A-2)			0.00						
4. Total funds av	ailable (sum of lines 1, 2, 3)			1,097.80						
5. Total monetary	expenditures (From Forms	31-B and 31-F	F)			56.00				
6. Balance on ha	nd (line 4 minus line 5)			1041.80	(include	s 24.00) un	reconciled)		
7. Value of in-kin	d contributions received (Fi	rom Form 31-J	J-1)	0.00						
8. Value of in-kin	d contributions made (From	Form 31-J-2)		0.00						
9. Outstanding lo	pans owed by committee (Fr	om Form 31-C	C)	0.00						
10. Outstanding	debts owed by committee (F	From Form 31-	-N)	0.00						
11. Outstanding I	loans owed to committee (F	rom Form 31-	K)	X - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		0.00				
12. Value of inde	pendent expenditures made	(From Form	31-U)			0.00				
	T IS MADE UNDER PENALT MITS ELECTION FALSIFICA					HE FIF	тн	DEGREE.		
Tourn	The Mass	Lina V	llasu	1303		07/27	/202	21		
Signature of reasurer of	r Deputy Treasurer		uwu			Date (N	/M/C	DD/YYYY)		
Contribution Pages	Expenditure Pages	Other	Pages		Total Pa	ages				
1	Printed from	Greene	e Cou	inty `	Web	site		Last Up	odated	09/2017



28 JUL '21 PH12 Page 1

Statement of Contributions Received

Form 31-A

ORC 3517.10

			WANTED IN				
Full Name of Committee							
Hayes for Prosecutor		\$ 3.50		**************************************			
Full Name of Contributor				Registration Numb	istration Number, if PAC		
David D. Hayes							
Street Address	Employer	/Occupation/Labor Or	rganization*	<u> </u>	Form (Cash, Check, etc.)		
2663 Cross Country Road					Check		
City	State	zate Zip Code Date (MM/DD/YYYY)			Amount		
Beavercreek	он 🔻	45431		07/12/2021	\$500.00		
Full Name of Contributor			1 - 4 - 34 . (A - 4) - 12 - 12 - 14 - 2 - 14 - 24	Registration Numb	er, if PAC		
Jeannette M. Adkins							
Street Address	Employer	/Occupation/Labor Or	rganization*		Form (Cash, Check, etc.)		
1254 Cheatham Way					Check		
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount		
Bellbrook	он 🔻	45305		07/12/2021	\$500.00		
Full Name of Contributor	Registration Numb				er, if PAC		
Street Address	Employer	/Occupation/Labor Or	rganization*	.	Form (Cash, Check, etc.)		
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount		
	~						
Full Name of Contributor	L	•		Registration Numb	er, if PAC		
Street Address	Employer	/Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)		
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount		
	~						
Full Name of Contributor		A	Andrews Street Street Street	Registration Numb	er, if PAC		
Street Address	Employer	/Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)		
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount		
	_						
City	State	Zip Code	Date (MM/D	D/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)]

Page Total \$1,000.00



28 JUL '21 PH12:41

Page 1

Statement of Expenditures

Form 31-B

R.C. 3517.10

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Full Name of Committee						
Hayes for Prosecutor	· · · · · · · · · · · · · · · · · · ·					
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Key Bank			12/31/20	20	\$8.00	
Street Address	Purpose					
120 N. Detroit Street	Monthly Ser					
City		-			heck Number	
Xenia	OH ▼	453	385	Bar	nk Charge	
To Whom Paid	· · · · · · · · · · · · · · · · · · ·		Date (MM/DD/YYYY)		Amount	
Key Bank			01/29/20	21	\$8.00	
Street Address	Purpose					
120 N. Detroit Street	Monthly Service and Paper Statement Fee					
City	State Zip Code			Che	ck Number	
Xenia	он 45385			Ba	nk Charge	
o Whom Paid			Date (MM/DD/YYYY)		Amount	
Key Bank			02/26/20	21	\$8.00	
Street Address	Purpose Purpose					
120 N. Detroit Street	Monthly Ser	vice	e and Paper Statement	Fee	e	
City	State	Zip	Code	Check Number		
Xenia	ОН	45	385	Ва	nk Charge	
To Whom Paid			Date (MM/DD/YYYY)		Amount	
Key Bank		03/31/2021 \$8		\$8.00		
Street Address	Purpose					
120 N. Detroit Street	Monthly Se	vic	e and Paper Statement	Fee	е	
City	State Zip Code			Che	eck Number	
Xenia	OH 45385 Bank Charge			ink Charge		
To Whom Paid	I		Date (MM/DD/YYYY)		Amount	
Key Bank	04/30/2021 \$8.00			\$8.00		
Street Address	Purpose				d	
120 N. Detroit Street	Monthly Se	rvic	e and Paper Statement	Fe	е	
City	State	Zip	Code	Che	eck Number	
Xenia	ОН	45	385	Ва	ank Charge	
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28 JUL '21 PM12: 4Page 2

Statement of Expenditures

R.C. 3517.10

Full Name of Committee	taria a propinsi a propinsi pita dalam pita di Gara						
Hayes for Prosecutor							
To Whom Paid	WY COMPANY	are to the second	Date (MM/DD/YYYY)		Amount		
Key Bank		05/28/2021 \$8.00					
Street Address	Purpose						
120 N. Detroit Street	Monthly Service and				•		
City	State Zip Code Check Nun			eck Number			
Xenia	ОН ▼	453	385	Ва	Bank Charge		
To Whom Paid	THE STATE OF THE S		Date (MM/DD/YYYY)		Amount		
Key Bank			06/30/20)21	\$8.00		
Street Address	Purpose						
120 N. Detroit Street	Monthly Se	rvice	e and Paper Statement	Fee	e		
City	State Zip Code Check Numb			eck Number			
Xenia	ОН	45385			Bank Charge		
To Whom Paid	hom Paid				Amount		
Street Address	Purpose						
City	State	Zip	Code	Check Number			
	он						
To Whom Paid	<u> </u>		Date (MM/DD/YYYY)		Amount		
Street Address	Purpose						
City	State Zip Code		Che	eck Number			
	ОН						
To Whom Paid			Date (MM/DD/YYYY)		Amount		
Street Address	Purpose						
City	State	Zip	Code	Che	eck Number		
	ОН						
THE REPORT OF THE PARTY OF THE	. 1 *** - 24-40-497 by -0.00	district a r		NATIONAL PARTY NAMED IN			

Page Total \$ 16.00





Ohio Campaign Finance Report

Form 30-A

ORC 3517.10

		The state of the s										
Committee Name							Office So	ught				District
Hayes for Prosecutor							Greene	County	Pro	secutor		10th
Street Address				City	State Zip)			
2663 Cross Country Road Beavercreek							ОН	45	3431			
Candidate Name OR PAC Registration Number Treasurer Name						· · · · · · · · · · · · · · · · · · ·		Election Date (MI	M/DD/Y	YYY)		
David Dwayne Hayes			Je	eannette M.	Adkins					11/03/2020		
Type of Report (cho	oose one)	:										
☐ Annual ⊠ Se	emiannua	l Pre-Prima	ary [Post-Pr	rimary	Pre	-Genera		Pos	t-General		
Statewide Candidate	s Only:										Year	
☐ July Monthly [Augu	st Monthly	Septe	ember Mont	thly						2021	
Amended Report	Termin	ation			Short	Form R	eport (R	.C. 351	7.10	D(H))		
☐ No ⊠ Yes	1 1 1	eck this box if the shes to terminate								e is filing a d instructions.		
1. Amount broug	ht forwa	rd from last repo	ort					73.80				
2. Total monetary	y contrib	utions (From For	ms 3	1-A and 31-	E)		0.00					
3. Total other inc	ome (Fro	om Form 31-A-2)					0.00					
4. Total funds av	ailable (s	sum of lines 1, 2, 3	3)	- 216741 B				73.80				
5. Total monetary	y expend	litures (From Form	ms 31	I-B and 31-F	F)			56.00			0	12
6. Balance on ha	nd (line 4	minus line 5)						17.80				7
7. Value of in-kin	d contrib	outions received	(Fron	m Form 31-J	J-1)		0.00					
8. Value of in-kin	d contrib	outions made (Fro	om F	orm 31-J-2)			0.00					
9. Outstanding lo	oans owe	d by committee	(Fron	n Form 31-C	C)		0.00					
10. Outstanding	debts ow	ed by committee	e (Fro	om Form 31-	-N)		0.00					
11. Outstanding	loans ow	ed to committee	(Fro	m Form 31-	K)			0.00				
12. Value of inde	pendent	expenditures ma	ade (F	From Form	31-U)			0.00	4			
THIS STATEMEN WHOEVER COMI								HE FIF	тн	DEGREE.		
Frantle		edkins,	Ir	easure	V			02/14/	/23 (original: 07/27/2	2021	
Signature of Treasurer of	r Deputy Tr	easurer						Date (N	MM/D	D/YYYY)		
Contribution Pages 0		Expenditure Pages		Other 0	Pages		Total Pa	ages		FEB 15		
		l						1		Last Up	ualed	09/2017







Page <u>1</u>

Statement of Expenditures

Form 31-B

R.C. 3517.10

ull Name of Committee							
layes for Prosecutor							
o Whom Paid			Date (MM/DD/YYYY)		Amount		
(ey Bank			12/31/20	20	\$8.00		
street Address	Purpose						
20 N. Detroit Street	Monthly Ser	nly Service and Paper Statement Fee					
Dity	State Zip Code C			Che	Check Number		
Kenia	OH 45385 Bank Charge				nk Charge		
o Whom Paid			Date (MM/DD/YYYY)		Amount		
(ey Bank			01/29/20	21	\$8.00		
street Address	reet Address Purpose						
120 N. Detroit Street	Monthly Service and Paper Statement Fee				•		
Zity	State Zip Code Check Number				ck Number		
Kenia	OH 45385 Bank Chai				nk Charge		
o Whom Paid			Date (MM/DD/YYYY)		Amount		
Key Bank			02/26/20	21	\$8.00		
Street Address	Purpose						
120 N. Detroit Street	Monthly Se	rvice	e and Paper Statement	Fee	•		
Zity	State	Zip	Code	Che	ck Number		
Kenia	он	45	385	Ва	nk Charge		
o Whom Paid			Date (MM/DD/YYYY)		Amount		
Key Bank		03/31/2021 \$8.00					
Street Address	Purpose						
120 N. Detroit Street	Monthly Se	rvice	e and Paper Statement	Fee			
lity	State Zip Code Check Number			ck Number			
Kenia	OH 45385 Bank Charge				nk Charge		
o Whom Paid			Date (MM/DD/YYYY)		Amount		
Key Bank			04/30/20	21	\$8.00		
Street Address	Purpose						
120 N. Detroit Street	Monthly Se	rvice	e and Paper Statement	Fee	•		
Dity	State	Zip	Code	Che	ck Number		
Kenia	ОН	45	385	Ва	nk Charge		
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Statement of Expenditures

Form 31-B

R.C. 3517.10

ull Name of Committee								
layes for Prosecutor			=					
o Whom Paid				Date (MM/DD/YYYY)		Amount		
Key Bank				05/28/20	021	\$8.00		
treet Address		urpose			-			
20 N. Detroit Street	N	Monthly Service a			e and Paper Statement Fee			
ity	St	State Zip Code			Check Number			
Kenia	0	OH						
o Whom Paid				Date (MM/DD/YYYY)		Amount		
(ey Bank				06/30/2	021	\$8.00		
treet Address	1	Purpose						
I 20 N. Detroit Street Monthly Service and Paper Statement Fee					9			
ity	S	State Zip Code			Check Number			
Kenia	C	OH 45385				Bank Charge		
o Whom Paid				Date (MM/DD/YYYY)		Amount		
Street Address	F	Purpose						
		21-1-	7	Codo	Ch	hade Number		
äty		State	Zi	o Code	Check Number			
		OH .			\perp	TA		
o Whom Paid	*			Date (MM/DD/YYYY)		Amount		
itreet Address		Purpose						
MEGI VIII 699								
lity		State	Zi	p Code	Ch	eck Number		
,		ОН						
o Whom Paid				Date (MM/DD/YYYY)		Amount		
street Address		Purpose						
Zity		State	Z	ip Code	CI	neck Number		
		ОН						

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Page Total \$ 16.00	



#2692 17 FEB 2023 Specific of Elections Country

Ohio Campaign Finance Report

Form 30-A

ORC 3517.10

Committee Name	ommittee Name Office Sought						District	
Hayes for Prosecutor				Greene	County	Prosecutor		10th
Street Address		City			State	Zip		
2663 Cross Country Road		Beavercreek OH 45				45431		
Candidate Name OR PAC Registration	Number	Treasurer Name				Election	Date (MM/DD/	YYYY)
David Dwayne Hayes		Jeannette M. A	Adkins			11/03/2	2020	
Type of Report (choose one):								
☐ Annual ⊠ Semiannual	☐ Pre-Primary	Post-Pr	imary 🗌 Pr	e-Genera	I 🗌	Post-Genera	al	
Statewide Candidates Only:							Year	
☐ July Monthly ☐ August	Monthly Se	ptember Mont	hly				202	1
Amended Report Termina	tion		Short Form F	Report (R	.C. 351	7.10(H))		
	ck this box if the co es to terminate with					mittee is filing ached instruc		
1. Amount brought forward	I from last report				73.80			
2. Total monetary contribut	tions (From Forms	31-A and 31-	E)					
3. Total other income (From	n Form 31-A-2)							
4. Total funds available (su	m of lines 1, 2, 3)				73.80			
5. Total monetary expendit	ures (From Forms	31-B and 31-F	=)		56.00			
6. Balance on hand (line 4 r	minus line 5)				17.80			
7. Value of in-kind contribu	itions received (F	rom Form 31-	J-1)		0.00			
8. Value of in-kind contribu	itions made (From	Form 31-J-2)			0.00			
9. Outstanding loans owed	by committee (Fr	om Form 31-0	5)	Aug	0.00			
10. Outstanding debts owe	d by committee (From Form 31-	-N) / 📆	ene chone	0.00			
11. Outstanding loans owe	d to committee (F	rom Form 31-	K)	5	0.00			
12. Value of independent e	xpenditures made	(From Form	31-U)		0.00			
THIS STATEMENT IS MADE WHOEVER COMMITS ELEC					THE FIF	TH DEGRE	E.	
Frankle M. C.	dkins,	heasure	\mathcal{C}		02/14	1/23 (original:	: 07/27/2021	
Signature of Treasurer or Deputy Trea	asurer			_	Date (MM/DD/YYYY)		-
0	Expenditure Pages inted from	0	Pages County	Total F	Pages Osite	I	Last Update	d 09/201



Page 1

Statement of Expenditures

Form 31-B

R.C. 3517.10

ull Name of Committee						
layes for Prosecutor						
o Whom Paid		Date (MM/DD/YYYY)	Amount			
(ey Bank		12/31/202	20 \$8.00			
treet Address	Purpose					
20 N. Detroit Street	Monthly Serv	vice and Paper Statement F	Fee			
lity	State	State Zip Code Check Numb				
Kenia	он 🔻	OH 45385 Bank Charge				
o Whom Paid		Date (MM/DD/YYYY)	Amount			
(ey Bank		01/29/202	21 \$8.00			
itreet Address	Purpose					
120 N. Detroit Street	Monthly Sen	vice and Paper Statement I	⁼ ee			
\(\bar{\text{ity}}\)	State	Zip Code	Check Number			
Kenia	ОН	45385	Bank Charge			
o Whom Paid		Date (MM/DD/YYYY)	Amount			
(ey Bank		02/26/2021 \$8.00				
Street Address	Purpose					
120 N. Detroit Street	Monthly Sen	vice and Paper Statement	Fee			
Dity	State	Zip Code	Check Number			
Kenia	ОН	45385	Bank Charge			
o Whom Paid		Date (MM/DD/YYYY)	Amount			
Key Bank		03/31/20	21 \$8.00			
Street Address	Purpose					
120 N. Detroit Street	Monthly Sen	vice and Paper Statement I	Fee			
Dity Same Charles of the Same Same Same Same Same Same Same Sam	State	Zip Code	Check Number			
Kenia	ОН	45385	Bank Charge			
o Whom Paid		Date (MM/DD/YYYY)	Amount			
Key Bank		04/30/20	21 \$8.00			
Street Address	Purpose	Allo				
120 N. Detroit Street	Monthly Seq	vice and Paper Statement	Fee			
Dity	State		Check Number			
Kenia		45385	Bank Charge			

Page Total \$ 40.00	,



Page 2

Statement of Expenditures

Form 31-B

R.C. 3517.10

	Date (MM/DD/YYYY)	Amount
	05/28/202	1 \$8.00
Purpose		
Monthly Serv	rice and Paper Statement Fe	ee
State Z	Zip Code C	heck Number
OH 🔽 4	45385 B	ank Charge
	Date (MM/DD/YYYY)	Amount
	06/30/202	1 \$8.00
Purpose		
Monthly Serv	vice and Paper Statement F	ee
State Z	Zip Code C	heck Number
ОН	45385 E	Bank Charge
	Date (MM/DD/YYYY)	Amount
Purpose		
State 2	Zip Code C	heck Number
он		
	Date (MM/DD/YYYY)	Amount
Purpose		
State	Zip Code C	heck Number
ОН		
	Date (MM/DD/YYYY)	Amount
	To Supply the second	
Purpose	EB Leg	
	T L BB	
State		Check Number
ОН		
	Monthly Server State OH Purpose Monthly Server Address of the Company of the Co	Purpose Monthly Service and Paper Statement Form State OH V 45385 Date (MM/DD/YYYY) 06/30/202 Purpose Monthly Service and Paper Statement Form State OH 45385 Date (MM/DD/YYYY) Purpose State OH Date (MM/DD/YYYY)

Page Total \$

OH Greene Hayes, David EY 2024

The remainder of the documents may be obtained at the following address:

https://app.box.com/s/jqwuxen2cdl5r7xy64ntqhx3aoan6rpm