



Committee Name Dismond for the Difference Committee		Office Sought Twinsburg City Council Ward 4		District Twinsburg	
Street Address 3066 Mathers Way		City Twinsburg	State OH	Zip 44087	
Candidate Name OR PAC Registration Number Joe Dismond		Treasurer Name Joseph D. Dismond		Election Date (MM/DD/YYYY) 11/7/2017	

Type of Report (choose one):

Annual
 Semiannual
 Pre-Primary
 Post-Primary
 Pre-General
 Post-General

Statewide Candidates Only:

July Monthly
 August Monthly
 September Monthly

Year
2017

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.
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1. Amount brought forward from last report	540.00
2. Total monetary contributions (From Forms 31-A and 31-E)	1,001.11
3. Total other income (From Form 31-A-2)	Zero
4. Total funds available (sum of lines 1,2, and 3)	1,541.11
5. Total monetary expenditures (From Forms 31-B and 31-F)	956.89
6. Balance on hand (line 4 minus line 5)	584.22
7. Value of in-kind contributions received (From Form 31-J-1)	Zero
8. Value of in-kind contributions made (From Form 31-J-2)	Zero
9. Outstanding loans owed by committee (From Form 31-C)	Zero
10. Outstanding debts owed by committee (From Form 31-N)	Zero
11. Outstanding loans owed to committee (From Form 31-K)	Zero
12. Value of independent expenditures made (From Form 31-U)	Zero

2017 OCT 25 PM 1:15

#14228

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

Joseph D. Dismond
Signature of Treasurer or Deputy Treasurer

10/25/2017
Date (MM/DD/YYYY)

Contribution Pages
4

Expenditure Pages
2

Other Pages

Total Pages
6



Statement of Expenditures for Social or Fund-Raising Event

Form 31-F
R.C. 3517.10

Full Name of Committee Dismond for the Difference Committee				
To Whom Paid Drugmart		Date (MM/DD/YYYY) 10/21/2017		Amount 30.00
Street Address 3100 Glenwood Dr.		Purpose Puerto Rico Relief Food Drive		
City Twinsburg	State OH	Zip Code 44087	Check Number Zero (cash)	
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	
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	
To Whom Paid		Date (MM/DD/YYYY)		Amount
Street Address		Purpose		
City	State OH	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 \$ 30



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Dismond for the Difference Committee				
Full Name of Contributor Michael Taylor			Registration Number, if PAC	
Street Address 6015 Deer Springs Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Cicero	State NY <input type="checkbox"/>	Zip Code 13039	Date (MM/DD/YYYY) 5/19/2017	Amount 84.00
Full Name of Contributor Mark Gunn			Registration Number, if PAC	
Street Address 2881 Eagle Crest Rd. Apt. 181 J		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Chino Hills	State CA <input type="checkbox"/>	Zip Code 91709	Date (MM/DD/YYYY) 9/26/2017	Amount 25.00
Full Name of Contributor Katara Thornton			Registration Number, if PAC	
Street Address 34 Willard St. Apt. S306		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Hartford	State CA <input type="checkbox"/>	Zip Code 06105	Date (MM/DD/YYYY) 9/28/2017	Amount 40.00
Full Name of Contributor Cynthia Steele			Registration Number, if PAC	
Street Address 8684 Gettysburg		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Check</i>
City Twinsburg	State OH	Zip Code 44087	Date (MM/DD/YYYY) 10/21/2017	Amount 100.00
Full Name of Contributor Kevin Kyles			Registration Number, if PAC	
Street Address 25510 Bridal Path Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Farmington Hills	State MI <input type="checkbox"/>	Zip Code 48335	Date (MM/DD/YYYY) 9/28/2017	Amount 19.11

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



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Dismond for the Difference				
Full Name of Contributor Sonia Wilson			Registration Number, if PAC	
Street Address 18 Sims St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Patchogue	State NY	Zip Code 11772	Date (MM/DD/YYYY) 5/19/2017	Amount 25.00
Full Name of Contributor Brian Burrows			Registration Number, if PAC	
Street Address 10513 Walker Vista Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Riverview	State FL	Zip Code 33578	Date (MM/DD/YYYY) 7/7/2017	Amount 60.00
Full Name of Contributor Troy Harrison			Registration Number, if PAC	
Street Address 38 Forsythia Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Bear	State DE	Zip Code 19701	Date (MM/DD/YYYY) 10/11/2017	Amount 10.00
Full Name of Contributor Kester Irvin Hanley Crosse			Registration Number, if PAC	
Street Address 11067 Gaither Farm Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Ellicott City	State MD	Zip Code 20142	Date (MM/DD/YYYY) 6/15/2017	Amount 100.00
Full Name of Contributor Mark Sorrells			Registration Number, if PAC	
Street Address 7590 Pinecrest Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Glenwillow	State OH	Zip Code 44139	Date (MM/DD/YYYY) 5/15/2017	Amount 50.00

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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Dismond for the Difference Committee				
Full Name of Contributor Herman Bennett			Registration Number, if PAC	
Street Address 1503 East Park Ave. M6		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Valdosta	State GA <input type="checkbox"/>	Zip Code 31602	Date (MM/DD/YYYY) 9/27/2017	Amount 25.00
Full Name of Contributor Seth Dresskie			Registration Number, if PAC	
Street Address 21 Harvard St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Valley Stream	State NY <input type="checkbox"/>	Zip Code 11580	Date (MM/DD/YYYY) 11/4/2017	Amount 25.00
Full Name of Contributor Aisha Boykin			Registration Number, if PAC	
Street Address 5963 Carnegie Cove Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43213	Date (MM/DD/YYYY) 5/23/2017	Amount 20.00
Full Name of Contributor Daniella Bryson			Registration Number, if PAC	
Street Address 1477 Ben Franklin Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Tulane	State CA <input type="checkbox"/>	Zip Code 93274	Date (MM/DD/YYYY) 10/15/2017	Amount 10.00
Full Name of Contributor James Foulke			Registration Number, if PAC	
Street Address 1901 Aurora Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Raleigh	State NC <input type="checkbox"/>	Zip Code 27615	Date (MM/DD/YYYY) 9/29/2017	Amount 50.00

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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Dismond for the Difference Committee				
Full Name of Contributor Darryl Rodgers			Registration Number, if PAC	
Street Address 8 Vanderbilt Ave. Apt. 6		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Brooklyn	State NY <input type="checkbox"/>	Zip Code 11205	Date (MM/DD/YYYY) 10/16/2017	Amount 75.00
Full Name of Contributor Michael White			Registration Number, if PAC	
Street Address 10718 Fallbrook Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Oakland	State CA <input type="checkbox"/>	Zip Code 94605	Date (MM/DD/YYYY) 06/23/2017	Amount 53.00
Full Name of Contributor Donte Wyatt			Registration Number, if PAC	
Street Address 1010 Second Ave. Suite 1020		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City San Diego	State CA <input type="checkbox"/>	Zip Code 92101	Date (MM/DD/YYYY) 10/11/2017	Amount 100.00
Full Name of Contributor Kevin Henderson			Registration Number, if PAC	
Street Address East 83rd Ter		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reytown	State MO <input type="checkbox"/>	Zip Code 64138	Date (MM/DD/YYYY) 9/17/2017	Amount 30.00
Full Name of Contributor Marlena Mathews			Registration Number, if PAC	
Street Address 960 Amherst St. Apt. 5		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Buffalo	State NY <input type="checkbox"/>	Zip Code 14216	Date (MM/DD/YYYY) 9/28/2017	Amount 100.00

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Statement of Expenditures

Form 31-B

R.C. 3517.10

Full Name of Committee Dismond for the Difference Committe			
To Whom Paid Gen 3 Printing Company		Date (MM/DD/YYYY) 06/06/2017	Amount 169.13
Street Address P O Box 467		Purpose Flyers	
City Twinsburg	State OH	Zip Code 44087	Check Number 3991
To Whom Paid Gen 3 Printing Company		Date (MM/DD/YYYY) 06/16/2017	Amount 236.19
Street Address P O Box 467		Purpose Flyers	
City Twinburg	State OH	Zip Code 44087	Check Number 3994
To Whom Paid Gen 3 Printing Company		Date (MM/DD/YYYY) 9/27/2017	Amount 551.57
Street Address P O Box 467		Purpose Yard Signs	
City Twinsburg	State OH	Zip Code 44087	Check Number 4023
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 \$ 956.89