

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>COMMITTEE FOR THE COLUMBUS ZOO LEVY</b>							
Full Name of Contributor <b>EDMUND REINHART</b>					Registration Number, if PAC		
Street Address <b>6634 STRTHERN CT</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City <b>DUBLIN</b>	State <b>OH</b>	Zip Code <b>43016</b>	M <b>0</b>	D <b>7</b>	Y <b>0</b>	Amount <b>\$100.00</b>	
Full Name of Contributor <b>ERIC SMOLENSKI</b>					Registration Number, if PAC		
Street Address <b>5691 FOX CHASE TRAIL</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City <b>GALENA</b>	State <b>OH</b>	Zip Code <b>43221</b>	M <b>0</b>	D <b>7</b>	Y <b>0</b>	Amount <b>\$500.00</b>	
Full Name of Contributor <b>DOUGLAS WARMOLTS</b>					Registration Number, if PAC		
Street Address <b>3250 KIOKA AVE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43221</b>	M <b>0</b>	D <b>6</b>	Y <b>3</b>	Amount <b>\$100.00</b>	
Full Name of Contributor <b>TERI BERLINER</b>					Registration Number, if PAC		
Street Address <b>901 CHERRFILED AVE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43235</b>	M <b>0</b>	D <b>6</b>	Y <b>3</b>	Amount <b>\$150.00</b>	
Full Name of Contributor <b>URI HOLMES</b>					Registration Number, if PAC		
Street Address <b>5450 FRANTZ RD STE 200</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City <b>DUBLIN</b>	State <b>OH</b>	Zip Code <b>43017</b>	M <b>0</b>	D <b>6</b>	Y <b>2</b>	Amount <b>\$100.00</b>	
Full Name of Contributor <b>PHILIP PIKELNY</b>					Registration Number, if PAC		
Street Address <b>PO BOX 163126</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>6</b>	Y <b>2</b>	Amount <b>\$250.00</b>	
Full Name of Contributor <b>KENNETH COOKE</b>					Registration Number, if PAC		
Street Address <b>1744 SE 9TH STREET</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City <b>FORT LAUDERDALE</b>	State <b>FL</b>	Zip Code <b>33316</b>	M <b>0</b>	D <b>6</b>	Y <b>2</b>	Amount <b>\$250.00</b>	
Full Name of Contributor <b>THERESA HARRIS</b>					Registration Number, if PAC		
Street Address <b>4176 MENDERES DR</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City <b>POWELL</b>	State <b>OH</b>	Zip Code <b>43065</b>	M <b>0</b>	D <b>6</b>	Y <b>2</b>	Amount <b>\$100.00</b>	

\* 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 **\$1,550.00**