

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Re-Elect King Trustee					
Full Name of Contributor Daniel J. Sutphen				Registration Number, if PAC	
Street Address 5832 Leven Links Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 1 7 1 3
			Amount \$150.00		
Full Name of Contributor Walter W. Reckless				Registration Number, if PAC	
Street Address 6076 Dublin Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 2 2 1 3
			Amount \$25.00		
Full Name of Contributor Dale Saylor				Registration Number, if PAC	
Street Address 5416 Aryshire Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 2 2 1 3
			Amount \$50.00		
Full Name of Contributor Karen L. Gillmor				Registration Number, if PAC	
Street Address 6585 Lockhart Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 2 8 1 3
			Amount \$100.00		
Full Name of Contributor Patrick Wilkerson				Registration Number, if PAC	
Street Address 5865 Houchard Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal	
City Dublin	State OH	Zip Code 43016	M 1	D 1	Y 1 9 1 3
			Amount \$50.00		
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y
			Amount		
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y
			Amount		
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y
			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 **\$375.00**