

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>COMMITTEE TO ELECT LIZ WARD, BLENDON TWP. TRUSTEE</b>									
Full Name of Contributor <b>JAN HEICHEL</b>						Registration Number, if PAC			
Street Address <b>5576 SANTIAGO DRIVE</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>			
City <b>WESTERVILLE</b>		State <b>OH</b>	Zip Code <b>43081</b>		M <b>0</b>	D <b>8</b>	Y <b>3</b>	Y <b>1</b>	Amount <b>\$225.00</b>
Full Name of Contributor <b>JOHN NICHOLSON</b>						Registration Number, if PAC			
Street Address <b>139 SOUTH SUNBURY RD</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>			
City <b>WESTERVILLE</b>		State <b>OH</b>	Zip Code <b>43081</b>		M <b>0</b>	D <b>9</b>	Y <b>2</b>	Y <b>6</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>TORY BROWN</b>						Registration Number, if PAC			
Street Address <b>4182 STONEWORKS PL</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>			
City <b>NEW ALBANY</b>		State <b>OH</b>	Zip Code <b>43054</b>		M <b>0</b>	D <b>9</b>	Y <b>2</b>	Y <b>6</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>ZANDRA MCENTIE</b>						Registration Number, if PAC			
Street Address <b>7595 BENDERSON DR</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>			
City <b>WESTERVILLE</b>		State <b>OH</b>	Zip Code <b>43082</b>		M <b>1</b>	D <b>0</b>	Y <b>0</b>	Y <b>9</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>DAWN STICKEL</b>						Registration Number, if PAC			
Street Address <b>1025 MC LEOD PARC</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>			
City <b>PICKERINGTON</b>		State <b>OH</b>	Zip Code <b>43147</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Y <b>3</b>	Amount <b>\$20.00</b>
Full Name of Contributor <b>JENNY RICE</b>						Registration Number, if PAC			
Street Address <b>1961 SAMADA AVE.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>			
City <b>WORTHINGTON</b>		State <b>OH</b>	Zip Code <b>43085</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Y <b>3</b>	Amount <b>\$10.00</b>
Full Name of Contributor <b>JOYCE SHUSTER</b>						Registration Number, if PAC			
Street Address <b>117 ACTON ROAD</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>			
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43214</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Y <b>7</b>	Amount <b>\$20.00</b>
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City		State	Zip Code		M	D	Y	Amount	
		OH							

\* 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 **\$450.00**