

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full CITIZENS FOR GOOD GOVERNMENT							
Full Name of Contributor Karen Bailey					Registration Number, if PAC		
Street Address 7127 Walnut Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 1	D 0	Y 1 4 0 9	Amount 500.00	
Full Name of Contributor James Bachmann					Registration Number, if PAC		
Street Address 7559 Ehret Round		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 1	D 0	Y 1 7 0 9	Amount 250.00	
Full Name of Contributor Janice Bobb					Registration Number, if PAC		
Street Address 8200 Clouse Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 1	D 0	Y 2 6 0 9	Amount 100.00	
Full Name of Contributor Charles Dankworth					Registration Number, if PAC		
Street Address 7574 Fenway Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 1	D 0	Y 1 5 0 9	Amount 250.00	
Full Name of Contributor Greg Comfort					Registration Number, if PAC		
Street Address 5500 New Albany Road		Employer/Occupation/Labor Organization* EMH&T			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43054	M 1	D 0	Y 2 8 0 9	Amount 1,000.00	
Full Name of Contributor Carl English					Registration Number, if PAC		
Street Address 7684 Ogden Woods Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 1	D 0	Y 2 0 0 9	Amount 250.00	
Full Name of Contributor Everett Gallagher					Registration Number, if PAC		
Street Address 7568 S. Goodrich Square		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 1	D 0	Y 1 6 0 9	Amount 100.00	
Full Name of Contributor Benjamin Hale					Registration Number, if PAC		
Street Address 7504 Phelps Close		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 1	D 0	Y 1 5 0 9	Amount 1,000.00	

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 3,450.00