## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full				•			<del></del>		
Friends of Randy Reisling									
Full Name of Contributor			<del></del>	Dagietra	tion Num	her if DA	<u></u>		
				ACG1301	ition remai	va, a 1 13			
Barb & Bob Reisling Street Address	Employer	(Ooouna	tion/Labor Organization*				Form (Cash, Chec	alreto\	
	Linproyen	оссира	MONTABOL OTGANIZATION				`	un, cit.)	
765 Citation Ct	Stat		Zip Code	1 14	I 5	Y	check Amount		
Gahanna	0	Н	43230	M   8	2 8	$\begin{vmatrix} 1 \\ 1 \end{vmatrix} 1$	Allioun	100.00	
Full Name of Contributor			<del>^</del>		tion Num		C		
Tom & Sherry Minton									
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
1619 Tuscara Dr				check					
City	Stat	te	Zip Code	TM	D	Y	Amount		
Grove City	01	Н	43123	18	2 6	1   1		40.00	
Full Name of Contributor	· · ·	· · · · · · · · · · · · · · · · · · ·	10120		tion Num	1 1 1	C	10.00	
Ed Leonard									
Street Address	Employer	Occupa	tion/Labor Organization*	<del></del>			Form (Cash, Chex	ck, etc.)	
573 Bradley St							check		
City	Stat	i <del>c</del>	Zip Code	М	D	Y	Amount		
Columbus	01	Н	43201	18	2 8	1 1		40.00	
Full Name of Contributor			10201		ttion Num		C	20.00	
Janet Shailer									
Street Address	Employer	Occupa	tion/Labor Organization*	- Laurence			Form (Cash, Chec	ck, etc.)	
6269 Rising Sun						check			
City	Stat	te	Zip Code	М	D	Y	Amount		
Grove City	01	H	43123	8	2 8	1 1		30.00	
Full Name of Contributor	Ü		10,120		nion Num		C	55.00	
Amy Dawson									
Street Address	Employer	Оссира	tion/Labor Organization*	· · · · · · · · · · · · · · · · · · ·			Form (Cash, Chec	ck, etc.)	
6084 Winnebago st						check			
City	Stat	te	Zip Code	М	D	Y	Amount		
Grove City	0	H	43123	8	2 8	1 1 1		20.00	
Full Name of Contributor			10120		ution Num		C	20.00	
Bill Lotz				Ĭ		•			
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Che	ck. etc.)			
3800 ZuberRd	, and a second			check					
City	Stat	te	Zip Code	М	D	Y	Amount		
Grove City	0 1		43123	1	2   8			25.00	
Full Name of Contributor			10120	Registra	tion Num	ber, if PA	C	20.00	
Gary Leasure				Ĭ		•			
Street Address	Employer	/Occupa	tion/Labor Organization*	<del>- I</del>			Form (Cash, Che	ck, etc.)	
4780 Saint Andrews				check					
City	Stat	te	Zip Code	Тм	Ð	Υ	Amount	<del></del>	
Grove City	o	Н	43123	8	2 8	1 .		100.00	
Full Name of Contributor Registration Number, if PAC									
Dave Hitchcock									
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
2269 Hillswood				check					
City	Sta	te	Zip Code	М	D	Y	Amount		
Grove City	0	Η	43123	9	0 1	1 1		40.00	

Page Total \$	395.00

<sup>\*</sup> 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)]