31-	Α		
R.C.	351	7.	10

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Committee to Elect Mayton								
Full Name of Contributor			Registra	tion Num	ber, if PA	C		
Wiles Boyle Burkholder Bringardner C	O I PA			1058				
Street Address		ation/Labor Organization*	Cı	1000	-	Form (Cash, Che	ek etc.)	
300 Spruce Street		adole Baoor organization				Check	ion, cic.)	
City	State	Zip Code	М	D	ΙΥ	Amount		
Columbus	OH	43215	019		$\begin{vmatrix} 1 \end{vmatrix}$ 3	, biiQaii	500.00	
Full Name of Contributor	TOTT	40210		<u> </u>		C	300.00	
Full Name of Contributor Registration Number, if PAC  Andrew Bowers								
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck etc.)	
2284 Cob Tail Way	Attorney			Check				
City	State	Zip Code	М	D		Amount		
Blacklick	OH	43004		0 4	1 3	l .	250.00	
Full Name of Contributor	OII	15001					250.00	
Full Name of Contributor Registration Number, if PAC Sidney S. Liebesman								
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck. etc.)	
12 Burnett Drive	Attorne					Check		
City	State	Zip Code	М	D	Y	Amount		
Wilmington	DE	19810		0 6	$1 \mid 3 \mid$		250.00	
Full Name of Contributor	100	17010			ber, if PA	C	250.00	
J. Scott Jamieson								
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)	
6818 Raavine Circle	Attorne					Check		
City	State	Zip Code	М	D	Y	Amount		
Worthington	OH	43085	0 9	016	$1 \mid 3$		250.00	
Full Name of Contributor	1	10000			ber, if PA	С	200.00	
Estratton Consulting LLC								
Sireet Address	Employer/Occup	ation/Labor Organization*	<del></del>			Form (Cash, Che	ck, etc.)	
28 W. Stafford Avenue	Evelyn S	Stratton, Attorney				Check		
City	State	Zip Code	М	D	Y	Amount		
Worthington	OHI	43085	0 9	0 6	1 3		150.00	
Full Name of Contributor					ber, if PA	С		
William A. Klatt								
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			_	Form (Cash, Check, etc.)		
345 Walhalla Road	Judge					Check		
City	State	Zip Code	М	D	Y	Amount		
Columbus	QH	43202	0 9	016	1 3		150.00	
Full Name of Contributor					ber, if PA			
Pamela Boratyn								
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)	
5492 Lynbrook LN	1					Check		
City	State	Zip Code	М	D	Y	Amount		
Westerville	OH	43082	0 9	1 0	1 3		100.00	
Full Name of Contributor			Registra	tion Num	ber, if PA	С		
Francis P. Welsh								
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)	
10 Morning Glory Circle	CEO Fra	inkly Legal			_	Check		
City	State	Zip Code	М	D	Y	Amount		
Mullica Hill	NJ	08062	0 9	1   1	1 3		250.00	

Page Total \$ 1,900.00

<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)]