

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full CITIZENS FOR HAUGHN						
Full Name of Contributor TODD M. PERIGO				Registration Number, if PAC		
Street Address 1849 AUTMN WIND DR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY	State OH	Zip Code 43123	M 0	D 8	Y 2	Amount \$100.00
Full Name of Contributor MARY L SMITH				Registration Number, if PAC		
Street Address 3163 ANNA AVENUE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY	State OH	Zip Code 43123	M 0	D 8	Y 2	Amount \$40.00
Full Name of Contributor MARK SEXTEN				Registration Number, if PAC		
Street Address 3170 ANNA AVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY	State OH	Zip Code 43123	M 0	D 8	Y 2	Amount \$20.00
Full Name of Contributor KAREN EATON				Registration Number, if PAC		
Street Address 4577 LOMBARDO ST		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY	State OH	Zip Code 43123	M 0	D 9	Y 0	Amount \$25.00
Full Name of Contributor JON C ROACH				Registration Number, if PAC		
Street Address 3980 BROADWAY		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY	State OH	Zip Code 43123	M 0	D 9	Y 0	Amount \$50.00
Full Name of Contributor JOHNDA HAUGHN				Registration Number, if PAC		
Street Address 3897 ORCHARD LANE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY	State OH	Zip Code 43123	M 0	D 9	Y 0	Amount \$100.00
Full Name of Contributor CHERYL GROSSMAN				Registration Number, if PAC		
Street Address 3143 PARK ST		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY	State OH	Zip Code 43123	M 0	D 9	Y 0	Amount \$100.00
Full Name of Contributor STEVEN CAHILL				Registration Number, if PAC		
Street Address 1912 SEASIDE CIRCLE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GROVE CITY	State OH	Zip Code 43123	M 0	D 9	Y 0	Amount \$50.00

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

Page Total **\$485.00**