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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Columbus Community Bill of R	ights PAC						
Full Name of Contributor				Registration Number, if PAC			
Daisy Turnmire			L				
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check	c, etc.)
2081 Radnor Ave						PayPal	
City	State	Zip Code	М	D	Y	Amount	
Columbus	o h	43224	0 9	1 5	1 6	<u></u>	48.25
Full Name of Contributor Registration Number, if PAC							
Jillian Phillips							
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Checl	k, etc.)
2350 Nayland Road						PayPal	
City	State	Zip Code	М	D	Y	Amount	
Columbus	o h	43220	0 9	2 1	1 6		33.68
Full Name of Contributor			Registra	tion Num	ber, if PA	.C	
Rebecca Haidt							
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Check	k, etc.)
48 South Merkle Road			,			PayPal	
City	State	Zip Code	М	D	Y	Amount	
Columbus	$o \mid h$	43209	0/9	2 6	1 6	l l	33.68
Full Name of Contributor				tion Num		C	
Ann Petrushka			1				
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check	k, etc.)
5630Smaller Rd						check	
City	State	Zip Code	М	D	Y	Amount	
Johnstown	o h	43031	0 9	1 8	1 6		50.00
Full Name of Contributor Registration Number, if PAC							A
Samuel Richards							
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check	k, etc.)
3202 Ridgewood Drive		-				cash	
City	State	Zip Code	M	D	Y	Amount	
Hilliard	$0 \mid h$	43026	1111	1 2	1 6	ł	20.00
Full Name of Contributor				tion Num			
Suzanne Patzer							
Street Address	Employer/Occupation/Labor Organization* Form (Cast					Form (Cash, Check	k, etc.)
1021 E. Broad St				Pa			
City	State	Zip Code	М	D	Ý	Amount	
Columbus	$o \mid h$	43205	1111	1 3	1 6	Ì	19.12
Full Name of Contributor		10200	Registra	tion Num	ber, if PA	C	
Torin Jacobs			ľ				
Street Address	Employer/Occur	pation/Labor Organization*	L			Form (Cash, Check	k, etc.)
1808 E. Broad St.	Display 1. Straphiloto masor S. Shamiladi					PayPal	, ,
City	State	Zip Code	M	D	Y	Amount	
Columbus	$0 \mid h$	43203	1111	1 8	1 6		19.12
Full Name of Contributor		40200		tion Num			1/.12
Connie Hammond							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check	k, etc.)
166 Acton Rd					cash		
City	State	Zip Code	M	D	Y	Amount	
Columbus	o h	43214	0 6	1	1 6		80.00
Colulitous		10411	0 0	1 - 0			

Page Tot	al \$	303.85

^{*} 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)]