

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Shane Ewald</b>							
Full Name of Contributor <b>Citizens for Anne Gonzales</b>					Registration Number, if PAC		
Street Address <b>865 Macon Alley</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43206</b>	M <b>0</b>	D <b>9</b>	Y <b>2</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Contributions from form No. 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
	<b> </b>		<b>1</b>	<b>0</b>	<b>0</b>	<b>960.00</b>	
Full Name of Contributor <b>Thomas J. Wester</b>					Registration Number, if PAC		
Street Address <b>888 Ludwig Dr.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Gahanna</b>	State <b>O   H</b>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Elizabeth T. Smith</b>					Registration Number, if PAC		
Street Address <b>1045 Eastchester Dr.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Gahanna</b>	State <b>O   H</b>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>6</b>	Amount <b>200.00</b>	
Full Name of Contributor <b>Dean Blamer</b>					Registration Number, if PAC		
Street Address <b>1118 Swanson Ct.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Reynoldsburg</b>	State <b>O   H</b>	Zip Code <b>43068</b>	M <b>1</b>	D <b>0</b>	Y <b>6</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Alan M. McClintock</b>					Registration Number, if PAC		
Street Address <b>702 Waybaugh Dr.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Gahanna</b>	State <b>O   H</b>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>6</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Paula Roman</b>					Registration Number, if PAC		
Street Address <b>748 N Stygler Rd.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Gahana</b>	State <b>O   H</b>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

\* 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 \$ 1,510.00