

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full COMMITTEE TO SAVE SENIOR SERVICES									
Full Name of Contributor MICHELLE L HENRY						Registration Number, if PAC			
Street Address 3524 E DESHLER AVE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H	Zip Code 43227-3570		M 1 0	D 2 2	Y 1 2	Amount 357.11	
Full Name of Contributor DIANA L KUBOVICIK						Registration Number, if PAC			
Street Address 418 E WEISHEIMER RD			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H	Zip Code 43214-2239		M 1 0	D 2 5	Y 1 2	Amount 100.00	
Full Name of Contributor CINDY L FARSON						Registration Number, if PAC			
Street Address 718 E 5TH ST			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H	Zip Code 43206		M 1 0	D 2 5	Y 1 2	Amount 100.00	
Full Name of Contributor JUDITH A LANE						Registration Number, if PAC			
Street Address 2300 W BAY ISLE DR SE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City ST PETERSBURG		State F L	Zip Code 33705-3353		M 1 0	D 2 5	Y 1 2	Amount 100.00	
Full Name of Contributor LARKE RECCHIE						Registration Number, if PAC			
Street Address 3758 LANCASTER RD			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City GRANVILLE		State O H	Zip Code 43023-9344		M 1 0	D 2 5	Y 1 2	Amount 50.00	
Full Name of Contributor JODIE L SMITH						Registration Number, if PAC			
Street Address 1809 LINNET AVENUE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H	Zip Code 43223		M 1 0	D 1 9	Y 1 2	Amount 10.00	
Full Name of Contributor JUANITA D PERRY						Registration Number, if PAC			
Street Address 5608 CALEDONIA DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City WESTERVILLE		State O H	Zip Code 43081-7054		M 1 0	D 1 9	Y 1 2	Amount 10.00	
Full Name of Contributor ANGELA D JACKSON						Registration Number, if PAC			
Street Address 4946 TAUTONWAY			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS		State O H	Zip Code 43228		M 1 0	D 1 9	Y 1 2	Amount 15.00	

* 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, if any, the employees are members of any, must appear. (R.C. 3517.10(B)(4))