3	1	-	A		
F	: (~	35	17	10

Statement of Contributions Received

Page	3_	

Prescribed by Secretary of State 03/05

Name of Committee in Full Teater for Hilliard						
Full Name of Contributor Leslie A. McNaughton	Registration Number, if PAC					
Street Address 3753 Scioto Run Boulevard	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	0 5 1 1 1 7	Amount \$100.00		
Full Name of Contributor Susan M. Spicer	Registration Number, if PAC					
Street Address 4345 River Landings Ct.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	0 5 1 1 1 7	Amount \$100.00		
Full Name of Contributor Barbara L. Cash	Registration Number, if P.	AC				
Street Address 4689 Prestige Lane	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	0 5 1 1 1 7	Amount \$50.00		
Full Name of Contributor Lisa A. Whiting	Registration Number, if P.	AC				
Street Address 801 Thorncrest Ct.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Galloway	State OH	Zip Code 43119	0 5 0 1 1 7	Amount \$150.00		
Full Name of Contributor Michael J. Vedra						
Street Address 4267 Shire Landing Road	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	0 ^M 5 0 1 1 7	Amount \$50.00		
Full Name of Contributor Tracy E. Kovalchik	Registration Number, if P	AC				
Street Address 3940 Kul Circle N	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	0 5 0 1 1 7	Amount \$50.00		
Full Name of Contributor Diane McGlinchey	<u> </u>		Registration Number, if P	AC		
Street Address 4789 Augustus Ct.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	0 5 0 1 1 7	Amount \$25.00		
Full Name of Contributor Citizens for Mingo			Registration Number, if P	AC		
Street Address 12364 Thoroughbred Drive	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check		
^{City} Pickerington	State OH	Zip Code 43147	0 5 0 1 1 7	Amount \$200.00		

Page Total \$725.00

^{*} 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)]