

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>CITIZENS FOR JEFFERSON TOWNSHIP</b>						
Full Name of Contributor <b>MIKE ROWAN</b>				Registration Number, if PAC		
Street Address <b>6300 DARLING RD</b>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>BLACKLICK</b>	State <b>OH</b>	Zip Code <b>43004</b>		M <b>0</b>	D <b>9</b>	Y <b>0112</b>
				Amount <b>\$250.00</b>		
Full Name of Contributor <b>RICHARD COURTER</b>				Registration Number, if PAC		
Street Address <b>1422 REYNOLDSBURG -NEW ALBANY RD</b>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>BLACKLICK</b>	State <b>OH</b>	Zip Code <b>43004</b>		M <b>0</b>	D <b>9</b>	Y <b>0215</b>
				Amount <b>\$250.00</b>		
Full Name of Contributor <b>JAMES MARTIN</b>				Registration Number, if PAC		
Street Address <b>7741 LUPINE DR</b>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>BLACKLICK</b>	State <b>OH</b>	Zip Code <b>43004</b>		M <b>0</b>	D <b>9</b>	Y <b>1015</b>
				Amount <b>\$100.00</b>		
Full Name of Contributor <b>STEVEN A MILLER</b>				Registration Number, if PAC		
Street Address <b>6444 DARLING RD</b>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>BLACKLICK</b>	State <b>OH</b>	Zip Code <b>43004</b>		M <b>0</b>	D <b>9</b>	Y <b>0915</b>
				Amount <b>\$250.00</b>		
Full Name of Contributor <b>JEFFREY R PALM</b>				Registration Number, if PAC		
Street Address <b>915 STOUTSVILLE PIKE</b>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>CIRCLEVILLE</b>	State <b>OH</b>	Zip Code <b>43113</b>		M <b>0</b>	D <b>8</b>	Y <b>1015</b>
				Amount <b>\$250.00</b>		
Full Name of Contributor <b>JANIS BOWLING</b>				Registration Number, if PAC		
Street Address <b>700 N WAGGONER RD</b>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <b>MONEY ORDER</b>		
City <b>BLACKLICK</b>	State <b>OH</b>	Zip Code <b>43004</b>		M <b>0</b>	D <b>9</b>	Y <b>2115</b>
				Amount <b>\$60.00</b>		
Full Name of Contributor <b>DONALD B SHACKELFORD</b>				Registration Number, if PAC		
Street Address <b>21 EAST STATE STREET, STE 1400</b>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43215</b>		M <b>0</b>	D <b>9</b>	Y <b>1515</b>
				Amount <b>\$200.00</b>		
Full Name of Contributor <b>DONALD G DUNN</b>				Registration Number, if PAC		
Street Address <b>5057 CLARK STATE RD</b>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>GAHANNA</b>	State <b>OH</b>	Zip Code <b>43230</b>		M <b>0</b>	D <b>9</b>	Y <b>1115</b>
				Amount <b>\$500.00</b>		

\* 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 **\$1,860.00**