

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full RUTHERFORD FOR WARD 3 COUNCIL							
Full Name of Contributor RICHARD C. RUTHERFORD					Registration Number, if PAC		
Street Address 1933 IRIS CT.		Employer/Occupation/Labor Organization* CANDIDATE			Form (Cash, Check, etc.) CK # 8578		
City GROVE CITY	State OH	Zip Code 43123	M 06	D 29	Y 09	Amount \$5,000.00	
Full Name of Contributor RICHARD C. RUTHERFORD					Registration Number, if PAC		
Street Address 1933 IRIS CT.		Employer/Occupation/Labor Organization* CANDIDATE			Form (Cash, Check, etc.) CK # 8617		
City GROVE CITY	State OH	Zip Code	M 09	D 08	Y 09	Amount \$5,000.00	
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	
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	
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	
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	
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	
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 \$

\$11,000.00