5

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							_		
LEVYFACTS.COM									
Full Name of Contributor				Registra	tion Numl	oer, if PA	С		
Greg Plutchak							_		
Street Address	Employer/0)ccupa	tion/Labor Organization*				Form (Cash, Check	ς, etc.)	
564 Hackberry Dr.							Check		
City	State		Zip Code	М	D	Y	Amount		
Westerville		Н	43081	012	0 4	1 2		100.00	
Full Name of Contributor					tion Numl		С		
Doug Krinsky									
Street Address	Employer/0)ссира	tion/Labor Organization*				Form (Cash, Check	ς, etc.)	
5405 Blackhawk Forest Dr							Check		
City	State		Zip Code	М	D	Y	Amount		
Westerville	1	Н	43082	0/2	0 4	1 2		100.00	
Full Name of Contributor	10!		13002		tion Numb			100.00	
John Sodt									
Street Address	Employer/f	Jeenna	tion/Labor Organization*				Form (Cash, Check	etc.)	
708 Autumn Tree Pl	Z.i.piojeii (, conpa					Check		
City	State		Zip Code	М	D	Y	Amount		
l ·	0	Н	43081	012		1 2	mount	50.00	
Westerville Full Name of Contributor	101		43001	_	tion Numl		C		
l .				Registra	don rann	DCI, II 171			
Thomas Osif	E-males-mail	```	tion/Labor Organization*				Form (Cash, Check	etc.)	
Street Address	Trinployer	эсспра	(HOH/Labor Organization					ι, οιο. γ	
496 Stration Sq.			2: 0.1.	T 14		Y	Check		
City	State		Zip Code	M	D		Allioual	50.00	
Westerville		Н	43081	0 2		1 2		50.00	
Full Name of Contributor				Registra	tion Numl	ber, if PA	C		
Brad Sibley	1								
Street Address	Employer/0	Оссира	tion/Labor Organization*				Form (Cash, Check	(, etc.)	
561 Crist Run Rd.							Check		
City	State		Zip Code	M _.	D	Y	Amount		
Westerville	0	Н	43082	0 2	$0 \mid 4$	1 2		25.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	.C		
Taxpayers for Westerville Schools Meeting									
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
							Cash		
City	State		Zip Code	М	D	Y	Amount		
Westerville	0	Н		0 2	0 4	1 2		45.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	С		
Sue Ellen King									
Street Address	Employer/0	Эссира	tion/Labor Organization*				Form (Cash, Checl	k, etc.)	
2548 Home Acres Dr.							Check		
City	State	:	Zip Code	М	D	Y	Amount		
Columbus	0	Н	43231	0 2	0 4	1 2	<u></u>	50.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	C		
Mark Wickline									
Street Address	Employer/0	Эссира	tion/Labor Organization*				Form (Cash, Check	c, etc.)	
8343 Schott Rd.							Credit		
City	State	:	Zip Code	М	D	Y	Amount		
Westerville	0	Н	43081	0 2	0 5	1 2		20.00	

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$	440.00