31-A
R.C. 3517.10

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full SUPPORT LACORTE FOR MAYOR CAMPAIGN								
Full Name of Contributor CHRIS WILLIAMS Registration Number, if PAC								
Street Address	E-malower/Occurs	sian a shar Omenization		Form (Cash, Check, etc.)				
	ddress Employer/Occupation/Labor Organization*			PAYPAL				
City SUNBURY	State OH	Zip Code 43074	0 8 0 2 1 5	Amount \$100.00				
Full Name of Contributor Registration Number, if PAC DON RICHARDSON								
Street Address 7664 GLENMORE CT	Employer/Occupa	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) PAYPAL				
City DUBLIN	State OH	Zip Code 43015	M D Y 0 8 1 5	Amount \$50.00				
Full Name of Contributor Registration Number, if PAC WILLIAM WINEGARDNER								
Street Address 2029 BOXER LANE	Employer/Occupation/Labor Organization		<u> </u>	Form (Cash, Check, etc.) PAYPAL				
City INDEPENDENCE	State KY	Zip Code 41051	0 8 1 0 1 5	Amount \$100.00				
Full Name of Contributor TRIXIE LEMASTER	· · · · · ·	<u></u>	Registration Number, if P	AC				
Street Address 479 WHITEHALL DRIVE	Employer/Occupa	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) CHECK				
City WHITEHALL	State OH	Zip Code 43213	0 8 1 4 1 5	Amount \$150.00				
Full Name of Contributor JASON PARISH	•		Registration Number, if P	AC				
Street Address 6753 SUNNINGDALE DRIVE	Employer/Occupation/Labor Organization BANKER			Form (Cash, Check, etc.) PAYPAL				
City WESTERVILLE	State OH	Zip Code 43082	0 8 1 4 1 5	Amount \$25.00				
Full Name of Contributor TIM H COOPER	<u>,</u>	<u>.</u>	Registration Number, if P	AC				
Street Address 884 COUNTYLINE ROAD		tion/Labor Organization FINANCIAL ADV		Form (Cash, Check, etc.) PAYPAL				
City WESTERVILLE	State OH	Zip Code 43082	M D Y 5 1 5	Amount \$270.00				
Full Name of Contributor KAREN HOPPER		Registration Number, if P	AC					
Ștreet Address 5385 BENNINGTON WOODS CT	Employer/Occupa	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK				
City COLUMBUS	State OH	Zip Code 43220	M D Y 0 8 1 2 1 5	Amount \$150.00				
Full Name of Contributor DOROTHY HOGE Registration Number, if PAC								
Street Address 4076 ELBERN AVE	Employer/Occupa	tion/Labor Organization*	•	Form (Cash, Check, etc.) PAYPAL				
City WHITEHALL	State OH	Zip Code 43213	M D Y 0 8 1 5 1 5	Amount \$25.00				

Page Total \$870.00

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)]