

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Safety First							
Full Name of Contributor Shannon Bush						Registration Number, if PAC	
Street Address 500 Rathmell Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43207	M 03	D 04	Y 10	Amount 35.00	
Full Name of Contributor Bonnie Wiley						Registration Number, if PAC	
Street Address 4277 Orchard Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Obetz	State OH	Zip Code 43207	M 03	D 11	Y 00	Amount 10.00	
Full Name of Contributor McDonald's						Registration Number, if PAC	
Street Address Groveport Pike			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Obetz	State OH	Zip Code 43207	M 03	D 08	Y 10	Amount 25.00	
Full Name of Contributor Obetz Hardware						Registration Number, if PAC	
Street Address 4256 Groveport Pike			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Obetz	State OH	Zip Code 43207	M 03	D 08	Y 10	Amount 20.00	
Full Name of Contributor Masons Sand & Gravel						Registration Number, if PAC	
Street Address 2385 Rathmell Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Obetz	State OH	Zip Code 43207	M 03	D 08	Y 10	Amount 25.00	
Full Name of Contributor K + M Market						Registration Number, if PAC	
Street Address 4305 Lancaster Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Obetz	State OH	Zip Code 43207	M 03	D 20	Y 10	Amount 100.00	
Full Name of Contributor Frank Harmoh						Registration Number, if PAC	
Street Address 8120 Corporate Blvd			Employer/Occupation/Labor Organization* Insurance			Form (Cash, Check, etc.) Check	
City Plain City	State OH	Zip Code 43064	M 03	D 18	Y 10	Amount 200.00	
Full Name of Contributor Wiseman Dance Studio						Registration Number, if PAC	
Street Address 4550 Lockbourne Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43207	M 03	D 11	Y 10	Amount 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 also appear. [R.C. 3517.10(B)(4)]

\$435.00
Page Total **\$435.00**