

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Families for Campbell						
Full Name of Contributor Citizens for Anne Gonzales					Registration Number, if PAC	
Street Address 865 Macon Alley		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 1	D 0	Y 0	Amount \$250.00
Full Name of Contributor Jeffrey & Gail Campbell					Registration Number, if PAC	
Street Address 10 Barry Goldwater Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Carmel	State NY	Zip Code 10512	M 1	D 0	Y 0	Amount \$50.00
Full Name of Contributor Leroy & Lorraine Pontzloff					Registration Number, if PAC	
Street Address 1287 Park Plaza Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43213	M 1	D 0	Y 1	Amount \$25.00
Full Name of Contributor Carol & Bill Bicking					Registration Number, if PAC	
Street Address 1599 Climbing Fig Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Blacklick	State OH	Zip Code 43004	M 1	D 0	Y 1	Amount \$5.00
Full Name of Contributor Patti & Bob Karst					Registration Number, if PAC	
Street Address 1038 Zodiac Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 1	Amount \$100.00
Full Name of Contributor					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State OH	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 OH	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 OH	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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$430.00**