Statement of Contributions Received

Prescribed by Secretary of State 3/05

| Name of Committee in Full | | | | | | |
|--|---|-----------------------------|-------------|-------------|--------------------------|-------------------------------|
| 1 | | | | | | |
| Citizens for Uttley Full Name of Contributor | | | Danietre | tion Num | ber, if PA | C |
| John W. Uttley, III | | | Registra | mon rum | ioci, ii i A | |
| Street Address | Employer/Occur | pation/Labor Organization* | | ~ | | Form (Cash, Check, etc.) |
| 5336 Wakefield Drive | Employen occup | | Check | | | |
| City | State | Zip Code | Тм | D | ΙΥ | Amount |
| Hilliard | OH | 43026 | $0 \mid 7$ | I . | 1 6 | 600.00 |
| Full Name of Contributor | 0 11 | 43020 | | | ber, if PA | |
| Committee to Elect Donald Schonhard | . | | Registre | ition ivan | iber, ii i A | |
| Street Address | | pation/Labor Organization* | | | | Form (Cash, Check, etc.) |
| 5307 Franklin Street | Employer/Occup | ation Lacor Organization | | | | Check |
| City | State | Zip Code | М | D | Y | Amount |
| Hilliard | OH | 43026 | 0 7 | | | 5,000.00 |
| Full Name of Contributor | 10 11 | 43020 | | | 1 6 ber, if PA | |
| David S. Meeks | | | Registra | mon rum | ibei, ii FA | .c |
| Street Address | Temployer/Occur | nation/Labor Organization* | | | | Form (Cash, Check, etc.) |
| | Employer/Occupation/Labor Organization* | | | | | |
| 20805 N. 74th Way | State | Zip Code | М | D | Y | Check Amount |
| Scottsdale | 1 | 85255 | - I . | | | |
| SCOTTS CLAIR Full Name of Contributor | ALZ | 63233 | 1 1 | 0 9 | 1 6 ber, if PA | 150.00 |
| ir un ivanie or controutor | | | Registra | nion Num | iber, ii FA | i.C |
| Street Address Employer/Occupation/Labor Organization* | | | | | - | Form (Cash, Check, etc.) |
| TEMPTOYET/Occupation/Labor Organization | | | | | | roini (Casii, Check, etc.) |
| City | State | Zip Code | М | D | Y | Amount |
| cny | State | Zip Code | 101 | | 1 | Amount |
| Full Name of Contributor | | 1 | Pagistro | tion Num | har if DA | C |
| Full Name of Contributor Registration Number, if PAC | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) | |
| Street Fiduless | Employer/Occupation/Labor Organization | | | | | iroim (Cash, Check, etc.) |
| City | State | Zip Code | М | D | Y | Amount |
| cny | State | Zip Code | IVI | | 1 | Amount |
| Full Name of Contributor | <u> </u> | 1 | Pagistro | tion Num | hor if DA | C . |
| Full Name of Contributor Registration N | | | | | ibei, ii FA | i.C |
| Address Employer/Occupation/Labor Organization* | | | | | | Form (Cook Chook etc.) |
| Succe Address | Employer/Occup | Form (Cash, Check, etc.) | | | | |
| City | State | 7in Code | I M | | T v | Amount |
| City | State | Zip Code | M | D | Y | Amount |
| Full Name of Contributor | | <u> </u> | Danista | aian N | han iCDA | |
| i un ivanie di Contributor | | Registration Number, if PAC | | | | |
| Street Address | E1/O | | | | | Francisco (Carlo Charles Arr) |
| Street Address Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) |
| Cit | - | Ta: 0 1 | | | T ,, | |
| City | State | Zip Code | M | D | Y | Amount |
| F.H.V CO | | <u> </u> | | , N | 1 2004 | |
| Full Name of Contributor Registration Number, if PAC | | | | | | C |
| Address Employer/Commercian/Labor Opening Link | | | | | F (C1 Cl1 | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | Form (Cash, Check, etc.) |
| City | Ciara | 7in Codo | 1 17 | | I v | A.m.o.umt |
| City | State | Zip Code | M | D | Y | Amount |
| L | | <u></u> | | <u> </u> | نبلب | L |

* 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 \$ 5,750.00