

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Evans for Grandview Schools							
Full Name of Contributor Steve Reynolds						Registration Number, if PAC	
Street Address 1170 Virginia Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grandview Heights		State OH	Zip Code 43212	M 1	D 0	Y 1 5 1 3	Amount \$25.00
Full Name of Contributor Patricia Evans						Registration Number, if PAC	
Street Address 6633 State Route 159			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Chillicothe		State OH	Zip Code 45601	M 1	D 0	Y 2 5 1 3	Amount \$100.00
Full Name of Contributor Deborah Brannan						Registration Number, if PAC	
Street Address 987 Grandview Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grandview Heights		State OH	Zip Code 43212	M 1	D 0	Y 2 5 1 3	Amount \$100.00
Full Name of Contributor Kathy Lithgow						Registration Number, if PAC	
Street Address 1226 Parkway Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Grandview Heights		State OH	Zip Code 43212	M 1	D 1	Y 1 2 1 3	Amount \$50.00
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
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 \$275.00