Statement of Contributions Received



Prescribed by Secretary of State 03/05

Name of Committee in Full Franklin County Libertarian Party	- General Fund			
Full Name of Contributor			Registration Number, if f	PAC
Chris Hayhurst				
Street Address	Employer/Occi	cupation/Labor Organization*		Form (Cash, Check, etc.)
2728 Proclamation Way		· · · · · · · · · · · · · · · · · · ·		cash
City Columbus	State OH	Zip Code 43207	1 1 0 5 1 0	Amount \$100.00
Full Name of Contributor			Registration Number, if P	PAC
Corey Borders				
Street Address 592 Nashoba Ave	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.)
592 Nashoba Ave City	State	far. a.J.	1.7 I N V	cash
Columbus	State OH	Zip Code 43223	1 1 0 5 1 0	Amount \$10.00
Full Name of Contributor Sulu Kelley III				PAC
Street Address 200 Barnhart	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
Marion Full Name of Contributor	ОН	43302	1 1 0 5 1 0	
Full Name of Contributor Jason M Jones			Registration Number, if P	AC
Street Address	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.)
304 Vista Dr		1		43230
City Gahanna	State OH	Zip Code 43230	1 1 0 5 1 0	Amount \$10.00
Full Name of Contributor Jim Schrader			Registration Number, if P	AĈ.
Street Address	Employer/Occu	upation/Labor Organization*	<u> </u>	Form (Cash, Check, etc.)
5895 Watkins Rd				cash
City Marysville	State OH	Zip Code 43040	1 1 0 5 1 0	Amount \$10.00
Full Name of Contributor	<u> </u>	<u> </u>	Registration Number, if P.	AC
Casey Borders				
Street Address 2683 Hoover Crossing Way	Employer/Occur	upation/Labor Organization*		Form (Cash, Check, etc.) check
City Grove City	State OH	Zip Code 43123	1 1 0 5 1 0	Amount \$17.76
Full Name of Contributor Committee to elect Casey Borders			Registration Number, if P.	AĈ
Street Address 2683 Hoover Crossing Way	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Grove City	State OH	Zip Code 43123	M D Y 1 1 1 1 8 1 0	Amount \$75.00
Full Name of Contributor Mark Noble	<u> </u>		Registration Number, if P.	
Street Address	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.)
723 Springs Dr				cash
City Columbus	State OH	Zip Code 43214	M D Y	Amount
Coldinous	U	43214	1 1 1 8 1 0	\$2.00

Page Total \$234.76

^{*} 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)]