## **Statement of Contributions Received**

Page 3

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Bonnie Michael			· · · · · ·	
Full Name of Contributor			Registration Number, if PAC	
Ditty Financial Forensics LLC				
Street Address 6065 Frantz Rd Suite 101	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check
City Dublin	Strate OH	Zip Code	0 8 2 8 1 5	Amount \$50.00
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·		Registration Number, if	
Rodney J. Harrison				
Street Address	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)
208 Saint Antoine St				Check
City Worthington	State OH	Zip Code 43085	0 8 1 5 1 5	Amount \$100.00
Full Name of Contributor Beth Evans	· · ·		Registration Number, if PAC	
Street Address 127 Glen Circle	Employer/Occa	pation/Labor Organization		Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	0 8 2 4 1 5	Amount \$100.00
Full Name of Contributor	<u></u>		Registration Number, if	PAC
Rebecca L Princehorn				
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
6179 Maxton Place				Check
Worthington	State OH	Zip Code 43085	M D Yi 0 8 2 7 1 5	Amount \$50.00
Full Name of Contributor Mark Glazman	· · · · · · · · · · · · · · · · · · ·		Registration Number, if	PAC
Street Address	Employer/Occa	pation/Labor Organization		Form (Cash, Check, etc.)
2725 Floribunda Dr				Check
City Columbus	State OH	Zip Code 43209	0 8 2 2 1 5	Amount \$50.00
Full Name of Contributor			Registration Number, if	PAC
Ralph J Kownacki				
Street Address 4138 Bishopsgate Way	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check
City	State	Zip Code	14 5 18	
Powell	OH	43065	M D Y O 8 2 6 1 5	\$40.00
Full Name of Contributor Regis			Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
231 Abbot Ave				Check
City Worthington	State OH	Zip Code 43085	M P Y O 9 1 8 1 5	Amount \$100.00
Full Name of Contributor Kensley F Nyce		·	Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
1601 W 5th Ave #112				Check
City	State	Zip Code	M D Yi	Amount
Columbus	) OH	43212	0 9 2 8 1 5	\$50.00

Page Total \$540.00

<sup>\*</sup> 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)]