

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full HILLIARD AREA REPUBLICAN CLUB POLITICAL ACTION COMMITTEE							
Full Name of Contributor James Ashenhurst					Registration Number, if PAC		
Street Address 5147 Vinington Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Dublin	State O H	Zip Code 43016	M 0 9	D 2 2	Y 0 9	Amount 50.00	
Full Name of Contributor Will and Phyllis Ernst					Registration Number, if PAC		
Street Address 4643 Schirtzinger Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 2 2	Y 0 9	Amount 25.00	
Full Name of Contributor Benjamin Hoff					Registration Number, if PAC		
Street Address 1861 Somerset Ct. W.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43227	M 0 9	D 2 2	Y 0 9	Amount 25.00	
Full Name of Contributor Timothy and Teresa Roberts					Registration Number, if PAC		
Street Address 4548 Braithway St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 2 2	Y 0 9	Amount 25.00	
Full Name of Contributor Clyde and Mary Seidle					Registration Number, if PAC		
Street Address 4733 Clubpark Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 2 2	Y 0 9	Amount 25.00	
Full Name of Contributor Melvin Sims					Registration Number, if PAC		
Street Address 4810 Cemetery Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 2 2	Y 0 9	Amount 25.00	
Full Name of Contributor J. William and Kathleen Uttley III					Registration Number, if PAC		
Street Address 4177 Stoneroot Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 2 2	Y 0 9	Amount 50.00	
Full Name of Contributor Ruth Adamonis					Registration Number, if PAC		
Street Address 2461 Warm Springs Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 1 2	Y 0 9	Amount 50.00	

* 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 \$ **275.00**