

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Columbus Community Bill of Rights PAC							
Full Name of Contributor Sergio Estrella					Registration Number, if PAC		
Street Address 25656 Huron St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Loma Linda	State c a	Zip Code 92354	M 0	D 8	Y 0	Amount 50.00	
Full Name of Contributor James Libby					Registration Number, if PAC		
Street Address 11680 Cange St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Anchorage	State a k	Zip Code 99516	M 0	D 8	Y 0	Amount 300.00	
Full Name of Contributor Jaime Pardo					Registration Number, if PAC		
Street Address 1635 Ringfield Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Galloway	State o h	Zip Code 43119	M 0	D 8	Y 1	Amount 20.00	
Full Name of Contributor Kathy Hayden					Registration Number, if PAC		
Street Address 2640 Sherwood Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Bexley	State o h	Zip Code 43209	M 0	D 8	Y 2	Amount 40.00	
Full Name of Contributor Suneetha Kurra					Registration Number, if PAC		
Street Address 60 S. Drexel Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State o h	Zip Code 43209	M 0	D 8	Y 2	Amount 25.00	
Full Name of Contributor Janet Braga					Registration Number, if PAC		
Street Address 240 stevenage dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal		
City Longwood	State F l	Zip Code 32779	M 0	D 8	Y 3	Amount 33.68	
Full Name of Contributor Gwen Fischer					Registration Number, if PAC		
Street Address 6793 Cheryl Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Hiram	State o h	Zip Code 44234	M 0	D 9	Y 1	Amount 30.00	
Full Name of Contributor Heather VanDeusen-Harhoff					Registration Number, if PAC		
Street Address Mathildenstrasse &A 82152		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Planegg, Germany	State	Zip Code	M 0	D 9	Y 1	Amount 25.00	

* 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 \$ **523.68**