Statement of Contributions Received

Page 1

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Elect Bill Todd	, W				****			
Full Name of Contributor Norman M. Spain				Registration Number, if PAC				
Street Address 4590 Knightsbridge Blvd., Apt. 314	Employer/Occupation/Labor Organization* Retired					Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43214	1 M	2 S	0	Y 7	Amount \$50.00	
Full Name of Contributor Stephen Green				Registration Number, if PAC				
Street Address 3752 North High St.		Employer/Occupation/Labor Organization* Breen Winkle & Green LLP/Attorne				Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43214	1 ^M D	2 D		Y 7	Amount \$250.00	
Full Name of Contributor Patrick H. Boggs				Registration Number, if PAC				
Street Address 1730 Doone Rd.	Employer/Occupation/Labor Organization* Onda, LaBuhn, Rankin & Boggs/Attorney					Form (Cash, Check, etc.)		
City Columbus	State OH	Zip Code 43221	1 0	2 ^D		Y 7	Amount \$200.00	
Full Name of Contributor			Registr	ation N	umbe	r, if PA	AC	
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
City	State OH	Zip Code	М	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	М	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	М	D		Y	Amount	
Full Name of Contributor Registrat					umbe	r, if P/	AC	
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
City	State OH	Zip Code	М	D		Y	Amount	
Full Name of Contributor Registration Number, if P						r, if P	AC	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D		Y	Amount	

Page Total \$500.00

^{*} 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 also appear. [R.C. 3517.10(B)(4)]