

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Jill Reardon for Trustee									
Full Name of Contributor Almeda S. Daugherty							Registration Number, if PAC		
Street Address 918 Linkfield Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Worthington		State OH	Zip Code 43085		M 1	D 0	Y 1	Amount \$1,000.00	
Full Name of Contributor Ryan E. Stull							Registration Number, if PAC		
Street Address 4099 Scenic View Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Powell		State OH	Zip Code 43065		M 1	D 0	Y 1	Amount \$1,000.00	
Full Name of Contributor							Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	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		M	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		M	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		M	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		M	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		M	D	Y	Amount	

* 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)]

Page Total **\$2,000.00**