

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full LEVYFACTS.COM							
Full Name of Contributor JAMES E. BURGESS					Registration Number, if PAC		
Street Address 4930 HONEYSUCKLE BLVD		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43230	M 0 8	D 2 4	Y 1 1	Amount 350.00	
Full Name of Contributor DOUG KRINSKY					Registration Number, if PAC		
Street Address 5405 BLACKHAWK FOREST DR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43082	M 0 8	D 2 4	Y 1 1	Amount 100.00	
Full Name of Contributor ROBERT EDWARDS					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CARD		
City WESTERVILLE	State O H	Zip Code	M 0 8	D 2 4	Y 1 1	Amount 1.00	
Full Name of Contributor JAMES E BURGESS					Registration Number, if PAC		
Street Address 4930 HONEYSUCKLE BLVD		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43230	M 0 8	D 2 5	Y 1 1	Amount 83.26	
Full Name of Contributor JOHN SODT					Registration Number, if PAC		
Street Address 708 AUTUMN TREE PL		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43081	M 0 8	D 2 6	Y 1 1	Amount 50.00	
Full Name of Contributor CASH					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization* 4TH FRIDAY EVENT			Form (Cash, Check, etc.) CASH		
City	State	Zip Code	M 0 8	D 2 6	Y 1 1	Amount 10.00	
Full Name of Contributor JOANNE GROSE					Registration Number, if PAC		
Street Address 602 MICHAEL AVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CARD		
City WESTERVILLE	State O H	Zip Code 43081	M 0 8	D 3 0	Y 1 1	Amount 100.00	
Full Name of Contributor JEFF JASWA					Registration Number, if PAC		
Street Address 467 MAINSAIL DR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CARD		
City WESTERVILLE	State O H	Zip Code 43081	M 0 9	D 0 4	Y 1 1	Amount 300.00	

* 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)]