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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Friends of Kelly Cruse							
Full Name of Contributor				Registration Number, if PAC			
Roger Cruse			1-1-8-0-1		,		
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)	
701 Henderson Ave						Check	
City	State	Zip Code	М	D	ΙΥ	Amount	
Williamstown	w v	26187	0 4	2 4	1 7	50.00	
Full Name of Contributor		Registration Number, if PA					
Stonewall Democrats of Central Ohio							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
700 Morse Road						Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	OH	43214	0:4	2:4	1 7	100.00	
Full Name of Contributor	Registration Number, if PAC						
Karen L Cruse							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)	
989 Hillridge Rd						Check	
City	State	Zip Code	М	D	Y	Amount	
Reynoldsburg	O H	43068	0 5	0 3	1 7	100.00	
Full Name of Contributor Registration Number, if Pa					ber, if PA	.C	
Street Address	Employer/Occup	ployer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount	
Full Name of Contributor Registration Number, if PAG					.c		
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount	
					1	<u></u>	
Full Name of Contributor Registration Number, if PAC							
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City	State	Zip Code	М	D	Y	Amount	
Full Name of Contributor	<u> </u>	Registration Number, if PA				C	
Street Address	Employer/Occup	ver/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount	
Full Name of Contributor Registration Number, if PA					.C		
Street Address	Employer/Occup	ccupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount	
assigned for a set-theretions from individuals over \$100 to attenue do and and	<u> </u>				<del></del>	6.1	

<sup>\*</sup> 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)]