

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Truex									
Full Name of Contributor Elizabeth Fox						Registration Number, if PAC			
Street Address 2144 Hagerman Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43235		M 0	D 8	Y 1	Y 8	Amount \$50.00
Full Name of Contributor Lorraine Gaughenbaugh						Registration Number, if PAC			
Street Address 12930 Edgewood Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Pickerington		State OH	Zip Code 43147		M 0	D 8	Y 1	Y 8	Amount \$25.00
Full Name of Contributor Marshall Spalding						Registration Number, if PAC			
Street Address 1940 Glenford Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Reynoldsburg		State OH	Zip Code 43068		M 0	D 8	Y 1	Y 8	Amount \$50.00
Full Name of Contributor Joy Beer						Registration Number, if PAC			
Street Address 7056 Lemert Ln			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Reynoldsburg		State OH	Zip Code 43068		M 0	D 8	Y 1	Y 8	Amount \$25.00
Full Name of Contributor Katherine Evans						Registration Number, if PAC			
Street Address 2436 Cambria Mill Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Granville		State OH	Zip Code 43023		M 0	D 8	Y 1	Y 8	Amount \$25.00
Full Name of Contributor Christine Smith						Registration Number, if PAC			
Street Address 8334 Priestley Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Reynoldsburg		State OH	Zip Code 43068		M 0	D 8	Y 1	Y 8	Amount \$20.00
Full Name of Contributor Malaysia Pollard						Registration Number, if PAC			
Street Address 7731 Worley Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Blacklick		State OH	Zip Code 43004		M 0	D 8	Y 1	Y 8	Amount \$10.00
Full Name of Contributor Deborah Dunlap						Registration Number, if PAC			
Street Address 9140 McMahon Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Reynoldsburg		State OH	Zip Code 43068		M 0	D 8	Y 1	Y 8	Amount \$4.00

* 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)]

Page Total **\$209.00**