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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
LEVYFACTS.COM								
Full Name of Contributor	ne of Contributor			Registration Number, if PAC				
CAROL HRIBAR								
Street Address	Employer/	Оссира	tion/Labor Organization*				Form (Cash, Chee	ck, etc.)
387 MAINSAIL DR							CARD	
City	Stat	С	Zip Code	М	D	Y	Amount	
WESTERVILLE	01	Н	43081	019	3 0	$ _{1 1 }$		50.00
Full Name of Contributor					tion Num		C	
TERESA RUH								
Street Address	Employer/	Оссира	ntion/Labor Organization*				Form (Cash, Chec	ck, etc.)
278 WEDGEWOOD CT		•					CARD	
City	Stat	e	Zip Code	Тм	D	Y	Amount	
WESTERVILLE		Н	43081	110	01	$ _{1 1}$		20.00
Full Name of Contributor			45001		tion Num			20.00
ROBERT YOPKO						,		
Street Address	Employer	Occupa	ation/Labor Organization*				Form (Cash, Che	ck_etc.)
	Isinproyer	Occupa	anon Easter Organization				CHECK	
5660 TRAVIS PTE CT	Stat		Zip Code	М	D	Y	Amount	
City	1 - 1	Н	l		I .		Miloun	25.00
WESTERVILLE	0	11	43082		0 1		<u> </u>	25.00
Full Name of Contributor				кедізіга	non wun	ber, u ra	ic .	
RALPH HOFFMAN						-	Form (Cash, Che	-1
Street Address	Employer/	Occupa	ation/Labor Organization*					ck, etc.)
5665 VANATTA RD							CHECK	
City	Stat		Zip Code	M	D	Y	Amount	400.00
CENTERBURG	0	Н	43011	1 0		1111	<u>l</u>	100.00
Full Name of Contributor				Registra	tion Nun	ber, if PA	ıC	
MARY VAN FLEET								
Street Address	Employer/	Оссира	ation/Labor Organization*				Form (Cash, Che	ck, etc.)
1206 WEDGEWOOD TERRACE							CARD	
City	Stat		Zîp Code	M	D	Y	Amount	
WESTERVILLE	0	Н	43082	1 0	0 3	1 1		75 <u>.</u> 00
Full Name of Contributor			<u> </u>	Registra	tion Num	ber, if PA	'C	
STEVE CURRY								
Street Address	Employer/	Оссира	ation/Labor Organization*				Form (Cash, Che	ck, etc.)
377 WINDCROFT DR	İ						CARD	
City	Stat	e	Zip Code	М	D	Y	Amount	
WESTERVILLE		Н	43082	1 0	0 4	1 1 1		50.00
Full Name of Contributor				Registra	tion Num	ber, if PA	ıC	
LISA HUDSON								
Street Address	Employer	Occup:	ation/Labor Organization*				Form (Cash, Che	ck, etc.)
352 EASTWOOD AVE			•				CARD	
City	Sta	te	Zip Code	М	D	Y	Amount	
WESTERVILLE	0	Н	43081	1 0	0 5	111		25.00
Full Name of Contributor			30001		ation Num		AC .	
JOHN SODT								
Street Address	Employer	/Occun	ation/Labor Organization*	<u> </u>			Form (Cash, Che	ck, etc.)
708 AUTUMN TREE PL	, ,,,,,,	,	~				CARD	
City	Sta	te	Zip Code	М	D	Y	Amount	
WESTERVILLE	Oï	Н	43081	110	015	1 1	l	50.00
[YEŞTEK YILLE	1 0 1		1000 r	1 4 1 0	1010	1 2 1 1		20,00

* 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)]

Page Total \$ 395.00