

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Wolfe For Mayor Committee							
Full Name of Contributor Stelios Giannopoulos					Registration Number, if PAC		
Street Address 247 N Parkview Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 5	Y 1909	Amount \$500.00	
Full Name of Contributor Matthew Ferris					Registration Number, if PAC		
Street Address 2036 Berkshire Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Cole	State OH	Zip Code 43221	M 0	D 5	Y 2209	Amount \$120.00	
Full Name of Contributor Wayne Brown					Registration Number, if PAC		
Street Address 391 GAYLE RD		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CK		
City GRANVILLE	State OH	Zip Code 43023	M 0	D 5	Y 2209	Amount \$200.00	
Full Name of Contributor Joseph Ridgeway					Registration Number, if PAC		
Street Address 2700 Sherwood Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 5	Y 2209	Amount \$75.00	
Full Name of Contributor Richard Pontius					Registration Number, if PAC		
Street Address 3841 Patricia Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Cole	State OH	Zip Code 43220	M 0	D 5	Y 2209	Amount \$300.00	
Full Name of Contributor Golf Muligans (extra shots) 34 @ \$5.00					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ca		
City	State OH	Zip Code	M	D	Y	Amount \$170.00	
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	

* 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 **\$1,365.00**