

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens to Reelect Lecklider</b>							
Full Name of Contributor <b>Stephen L. Stidhem</b>						Registration Number, if PAC	
Street Address <b>5373 Adventure Dr</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Dublin</b>			State <b>Oh</b>	Zip Code <b>43017</b>	M <b>09</b>	D <b>14</b>	Y <b>13</b>
						Amount <b>50.00</b>	
Full Name of Contributor <b>Jael Campbell</b>						Registration Number, if PAC	
Street Address <b>5565 Brand Rd.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Dublin</b>			State <b>Oh</b>	Zip Code <b>43017</b>	M <b>09</b>	D <b>22</b>	Y <b>13</b>
						Amount <b>150.00</b>	
Full Name of Contributor <b>Tim Lecklider</b>						Registration Number, if PAC	
Street Address <b>6305 Worsham Way</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Dublin</b>			State <b>Oh</b>	Zip Code <b>43016</b>	M <b>09</b>	D <b>26</b>	Y <b>13</b>
						Amount <b>250.00</b>	
Full Name of Contributor <b>Anna Luise Smith</b>						Registration Number, if PAC	
Street Address <b>2143 Royal Lodge Dr.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Falls Church</b>			State <b>VA</b>	Zip Code <b>22043</b>	M <b>09</b>	D <b>26</b>	Y <b>13</b>
						Amount <b>100.00</b>	
Full Name of Contributor <b>Joyce Nolan</b>						Registration Number, if PAC	
Street Address <b>643 Emerald Bay</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Destin</b>			State <b>FL</b>	Zip Code <b>32541</b>	M <b>10</b>	D <b>05</b>	Y <b>13</b>
						Amount <b>100.00</b>	
Full Name of Contributor <b>Mb Interests</b>						Registration Number, if PAC	
Street Address <b>7042 Shady Nelsms</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Dublin</b>			State <b>Oh</b>	Zip Code <b>43017</b>	M <b>10</b>	D <b>11</b>	Y <b>13</b>
						Amount <b>100.00</b>	
Full Name of Contributor <b>Wiles, Boyle, Burkholder, Bringerdis</b>						Registration Number, if PAC	
Street Address <b>300 Spruce St.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Dublin</b>			State <b>Oh</b>	Zip Code <b>43017</b>	M <b>10</b>	D <b>08</b>	Y <b>13</b>
						Amount <b>150.00</b>	
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City			State	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)]