

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Wade Steen							
Full Name of Contributor FROM 31-E 7/19/2009 EVENT						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 5,550.00	
Full Name of Contributor Joan Dugger						Registration Number, if PAC	
Street Address 1788 Coventry Road		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43212	M 0 8	D 0 5	Y 0 9	Amount 100.00	
Full Name of Contributor Mary Pitman						Registration Number, if PAC	
Street Address 2582 Henthorn Road		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 8	D 0 5	Y 0 9	Amount 100.00	
Full Name of Contributor Thomas Cotter						Registration Number, if PAC	
Street Address 1821 N. Devon Road		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43212	M 0 8	D 2 6	Y 0 9	Amount 100.00	
Full Name of Contributor Margaret Andrioff						Registration Number, if PAC	
Street Address 1426 S. Roosevelt Avenue		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43209	M 0 8	D 2 6	Y 0 9	Amount 40.00	
Full Name of Contributor Scott Williams						Registration Number, if PAC	
Street Address 2531 Sherwin Road		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 9	D 2 5	Y 0 9	Amount 25.00	
Full Name of Contributor Douglas Rogers						Registration Number, if PAC	
Street Address 2516 Sherwin Road		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 9	D 2 5	Y 0 9	Amount 100.00	
Full Name of Contributor Laurel Sawhill						Registration Number, if PAC	
Street Address 2355 Onandaga Drive		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 9	D 2 5	Y 0 9	Amount 100.00	

* 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)]