Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full				
Citizens to Improve Quality of Lif	e for Reynoldst	ourg		
Full Name of Contributor Bob Martin			Registration Number, if P	AC
Street Address 7934 E. Main St.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State OH	Zip Code 43068	0 2 0 8 1 7	Amount \$50.00
Full Name of Contributor Registration Number, if PAC Neal Whitman				
Street Address 7916 Windrift Pl.	Employer/Occupation/Labor Organization •			Form (Cash, Check, etc.) Check
^{City} Reynoldsburg	State OH	Zip Code 43068	0 2 0 B 1 7	Amount \$50.00
Full Name of Contributor Lisa M. Waickman				
Street Address 833 Tricolor Dr.	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	0 2 1 4 1 7	Amount \$100.00
Full Name of Contributor Registration Number, if PAC Barbara J. Teague				AC
Street Address 1110 Tiffany Dr.	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Money Order
^{City} Reynoldsburg	State OH	Zip Code 43068	0 2 2 3 1 7	Amount \$200.00
Full Name of Contributor Registration Number, if PAC Heartland Bank				
Street Address 850 North Hamilton Road	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	0 2 2 2 1 7	Amount \$500.00
Full Name of Contributor Registration Number, if PAC Margaret J. Estadt				
Street Address 6488 Timbermill Way	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) website
City Reynoldsburg	State OH	Zip Code 43068	0 3 0 1 1 7	Amount \$25.00
Full Name of Contributor Registration Number, if PAC Sandra Boller				
Street Address 6951 Ardelle Dr.	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	M D Y 0 3 0 1 1 7	Amount \$100.00
Full Name of Contributor Registration Number, if PAC Patrick Zollars				
Street Address Pat@cs-gc.com	Employer/Occu	ipation/Labor Organization*		Form (Cash, Check, etc.) Check
City	State OH	Zip Code	M D Y 1 7	Amount \$500.00

Page Total \$1,525.00

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)]