

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full LEVYFACTS.COM									
Full Name of Contributor Intentionally left blank - Amended Return						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State	Zip Code	M	D	Y	Amount	
Full Name of Contributor Intentionally left blank - Amended Return						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State	Zip Code	M	D	Y	Amount	
Full Name of Contributor Intentionally left blank - Amended Return						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State	Zip Code	M	D	Y	Amount	
Full Name of Contributor Carol Hribar						Registration Number, if PAC			
Street Address 387 Mainsail Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit		
City Westerville			State O H	Zip Code 43081	M 1 2	D 1 4	Y 1 1	Amount 500.00	
Full Name of Contributor William Roebuck						Registration Number, if PAC			
Street Address 5769 Blackhawk Forest Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit		
City Westerville			State O H	Zip Code 43082	M 1 2	D 1 7	Y 1 1	Amount 50.00	
Full Name of Contributor Kurt Hinterschied						Registration Number, if PAC			
Street Address 921 S. Hempsted Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit		
City Westerville			State O H	Zip Code 43081	M 1 2	D 2 3	Y 1 1	Amount 100.00	
Full Name of Contributor Doug Rankin						Registration Number, if PAC			
Street Address 516 Woodview Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit		
City Westerville			State O H	Zip Code 43081	M 1 2	D 3 1	Y 1 1	Amount 100.00	
Full Name of Contributor Anonymous cash at meeting						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CASH		
City Westerville			State O H	Zip Code	M 0 1	D 0 5	Y 1 2	Amount 80.00	

* 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)]