

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full COMMITTEE FOR THE COLUMBUS ZOO LEVY											
Full Name of Contributor FIESTA CONCESSION CORP						Registration Number, if PAC					
Street Address 2834 E. 46TH STREET			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City VERNON		State CA	Zip Code 90058		M 0	D 8	Y 0	Y 3	Y 1	Y 5	Amount \$1,000.00
Full Name of Contributor CATHERINE L. FERRARI						Registration Number, if PAC					
Street Address 5050 OLENTANGY RIVER ROAD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City COLUMBUS		State OH	Zip Code 43214		M 0	D 8	Y 0	Y 7	Y 1	Y 5	Amount \$100.00
Full Name of Contributor TAFT STETTINIUS & HOLLISTER BETTER GOVERNMENT FUND						Registration Number, if PAC					
Street Address 425 WALNUT ST. STE 1800			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City CINCINNATI		State OH	Zip Code 45202		M 0	D 8	Y 1	Y 2	Y 1	Y 5	Amount \$1,000.00
Full Name of Contributor CASHMANS						Registration Number, if PAC					
Street Address 1646 US HIGHWAY 42 N			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City DELAWARE		State OH	Zip Code 43015		M 0	D 8	Y 1	Y 7	Y 1	Y 5	Amount \$1,000.00
Full Name of Contributor WOLFE ENTERPRISES, INC.						Registration Number, if PAC					
Street Address 34 S THIRD STREET			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City COLUMBUS		State OH	Zip Code 43215		M 0	D 8	Y 1	Y 3	Y 1	Y 5	Amount \$25,000.00
Full Name of Contributor JOHN P. GANNON						Registration Number, if PAC					
Street Address 6040 KENTIGERN CT S			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City DUBLIN		State OH	Zip Code 43017		M 0	D 8	Y 2	Y 5	Y 1	Y 5	Amount \$100.00
Full Name of Contributor STEPHANI HIGHTOWER						Registration Number, if PAC					
Street Address 223 WOODLAND AVE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City COLUMBUS		State OH	Zip Code 43203		M 0	D 9	Y 0	Y 3	Y 1	Y 5	Amount \$100.00
Full Name of Contributor NATIONWIDE MUTUAL INSURANCE COMPANY						Registration Number, if PAC					
Street Address ONE NATIONWIDE PLAZA			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City COLUMBUS		State OH	Zip Code 43215		M 0	D 8	Y 2	Y 8	Y 1	Y 5	Amount \$50,000.00

* 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)]

Page Total **\$78,300.00**