n	10
Page	19

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Count	Name of Committee in Full				Sahayasa a	Lorent des literations de la company de la c		
Family new Fam								
Todd Ebbrecht Street Address Stree				Dagietro	tion Nur	-bon if D		
Series Address				Kerisua	ition ivui	nber, 11 F	AC	
State		Employer/Occ	amation/Lahor Organization*				Tearm (Cook Ch	~~!r oto \
State		Employer	upation/Labor Organization					eck, etc.)
Pickerington		State	17:n Codo	1 1/	7 7	7 57	**************************************	
Registration Number, if PAC Part (Cash, Check, etc.) Check			. 1 "	1 .	1 .	1 .	Amount	0° 00
Employer/Occupation/Labor Organization*	FICKETINGUON	1011	4314/	encontraction and the second	distribution or amore	THE RESERVE OF THE PARTY OF THE	<u> </u>	85.00
Size Address Employer/Occupation/Labor Organization*				Registra	tion Nun	nber, if P	AC	
Table Tabl					Elollatina olemperia in cons	M0000000000000000000000000000000000000		
State		Employer/Occi	upation/Labor Organization*				R .	eck, etc.)
Reynoldsburg			**************************************	·			Check	
Registration Number, if PAC			1 -	1 .	l .	i .	Amount	
Victoria Gerardi Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check		O n	43068	1 0	1 6	0 9		80.00
Employer/Occupation/Labor Organization*				Registra	tion Nun	ber, if P.	AC	~ · · · · · · · · · · · · · · · · · · ·
City Cand Contributor Fall Name of Contributor Famela Olszewski Street Address Delaware O H 43015 Form (Cash, Check, etc.) Check Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check City State State City State City State Delaware O H 43015 T 0 1 6 0 9 T 0 0 9 T 0 0 0 9 T 0 0 0 9 T 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
State		Employer/Occi	upation/Labor Organization*		W		Form (Cash, Check, etc.)	
State							Check	
Full Name of Contributor Sarah Novak Street Address Lipy Code City Pamela Olszewski Street Address Lipy Code State State Lipy Code Pamela Olszewski Street Address Lipy Code State Lipy Code Pamela Olszewski Street Address Lipy Code State Lipy Code Pamela Olszewski Street Address Lipy Code State Lipy Code State Lipy Code State Lipy Code State Lipy Code O H 43015 D Y Amount Check Check City Delaware O H 43015 Lipy I I I I I I I I I I	City	State	Zip Code	M	D	Y	<u> </u>	
Registration Number, if PAC	Canal Winchester	OH	43110	1110	1 6	0 9		50.00
Employer/Occupation/Labor Organization*	Full Name of Contributor			THE RESERVE OF THE PARTY OF THE	ACTION CONTRACTOR AND ADDRESS OF THE PARTY O	A STREET, STRE	AC	
Employer/Occupation/Labor Organization*	Sarah Novak							
A75 S Haymore		Employer/Occi	upation/Labor Organization*				Form (Cash, Che	eck, etc.)
State	475 S Havmore	-	•				8	,,
Worthington	City	State	IZip Code	ТМ	D	Гу	Commence of the commence of th	
Registration Number, if PAC	Worthington	1	1 -	1			11	50.00
Pamela Olszewski Street Address Employer/Occupation/Labor Organization*	Full Name of Contributor		TOUCO	many (Charles of the Contraction of the	Control Charge Presenting agency	THE RESERVE OF THE PERSON OF T	A.C.	30.00
Employer/Occupation/Labor Organization*	Pamala Olszawski			1.08.00.		1001, 11 1 1	nc.	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Street Address	Employer/Occi	mation/Lahor Organization*				Form (Cash Cha	ole ato)
City Delaware O H 43015 $\frac{1}{10000000000000000000000000000000000$		Limpio, circosci	thation Paooi Organization				i i	CK, etc.)
Delaware		State	T7:n Codo	T 34		T 37		····
Full Name of Contributor Candace Shicks Street Address 49 Old County Line Rd City Westerville O H 43081 Form (Cash, Check, etc.) Check City Registration Number, if PAC Check Check Check Check Registration Number, if PAC Check Check Check Check Check Check Check Check Check Countibutor Registration Number, if PAC Registration Number, if PAC Registration Number, if PAC Form (Cash, Check, etc.) Check City State City Registration Number, if PAC Check City State City State City State City Check	•	1	1 -	1 .	i .		Amount	40.00
Candace Shicks Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check			43013	AND DESCRIPTION OF THE PROPERTY OF	management in the second	Action Company of the	. ~	10.00
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$								
A9 Old County Line Rd City State Zip Code M D Y Amount Westerville O H 43081 1 0 1 6 0 9 80.00 Registration Number, if PAC Rovin Shrilla Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check City State Zip Code M D Y Amount Westerville O H 43082 1 0 1 6 0 9 10.00 Full Name of Contributor Registration Number, if PAC Melissa Simashkevich Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check City State Zip Code M D Y Amount Melissa Simashkevich Form (Cash, Check, etc.) Check City State Zip Code M D Y Amount Check Amount Amount Amount Form (Cash, Check, etc.) Check Check City State Zip Code M D Y Amount Check Amount Amount Check Check City State Zip Code M D Y Check Amount Check Check Check City Check City Check City Check City Check City Check City Check City Check City Check Check City Check Check Check Check City Check Check Check Check City Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Check Chec						NO. 2012-100-100-100-100-100-100-100-100-100		· · · · · · · · · · · · · · · · · · ·
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		Employer/Occu	ipation/Labor Organization*				E .	ck, etc.)
Westerville								
Full Name of Contributor Rovin Shrilla Street Address 693 Waxwing Ct City State Westerville Full Name of Contributor Melissa Simashkevich Street Address 559 Winfield Meadows Dr Employer/Occupation/Labor Organization* Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check Registration Number, if PAC Registration Nu	•	3	1 ^	1 1) I		
Rovin Shrilla Street Address 693 Waxwing Ct City State Westerville O H 43082 Tillo 1 6 0 9 Tollow Registration Number, if PAC Melissa Simashkevich Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check Registration Number, if PAC Melissa Simashkevich Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check City State Zip Code M D Y Amount			43081					80.00
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$				Registrat	ion Num	ber, if PA	AC	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$			······································			***************************************		
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Street Address	Employer/Occu	pation/Labor Organization*		***************************************		Form (Cash, Che	ck, etc.)
Westerville O H 43082 I O I 6 O 9 10.00 Full Name of Contributor Melissa Simashkevich Street Address 559 Winfield Meadows Dr City State Sta							Check	
Full Name of Contributor Melissa Simashkevich Street Address 559 Winfield Meadows Dr City Registration Number, if PAC Form (Cash, Check, etc.)	City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor Melissa Simashkevich Street Address 559 Winfield Meadows Dr City Registration Number, if PAC Registration Number, if PAC Porm (Cash, Check, etc.) Check M D Y Amount	Westerville	O H	43082	1 0	1 6	0 9		10.00
Street Address	Full Name of Contributor	Á		THE RESIDENCE OF THE PARTY OF T	Programme Company of the Company		АC	
Street Address	Melissa Simashkevich							
559 Winfield Meadows Dr City State Zip Code M D Y Amount One of the ck of	Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Che	ck, etc.)
City State Zip Code M D Y Amount	559 Winfield Meadows Dr						Check	
	City	State	Zip Code	M	D	Y		
	Westerville	O H	43082	1 0	1 6	0 9		40.00

* 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)]

Page Total \$ 405.00