

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full CITIZENS FOR WRIGHT									
Full Name of Contributor BRANDON WRIGHT						Registration Number, if PAC			
Street Address 105 ROCKY CREEK DR			Employer/Occupation/Labor Organization* PNC BANK-Banker				Form (Cash, Check, etc.) CASH		
City GAHANNA		State OH	Zip Code 43230		M 0	D 9	Y 0	Y 6	Amount \$100.00
Full Name of Contributor KIM KYER						Registration Number, if PAC			
Street Address 103 ROCKY CREEK DR			Employer/Occupation/Labor Organization* STATE OF OHIO-SECRETARY				Form (Cash, Check, etc.) CASH		
City GAHANNA		State OH	Zip Code 43230		M 0	D 9	Y 2	Y 0	Amount \$25.00
Full Name of Contributor JACOB HOUGH						Registration Number, if PAC			
Street Address 105 ROCKY CREEK DR			Employer/Occupation/Labor Organization* BARCELONAS/CHEF				Form (Cash, Check, etc.) CASH		
City GAHANNA		State OH	Zip Code 43230		M 1	D 0	Y 0	Y 5	Amount \$500.00
Full Name of Contributor T.J KLEINMAN						Registration Number, if PAC			
Street Address 1050 E. BROAD ST			Employer/Occupation/Labor Organization* CHASE/CUSTOMER SERVICE				Form (Cash, Check, etc.) CASH		
City COLUMBUS		State OH	Zip Code 43215		M 1	D 0	Y 2	Y 6	Amount \$60.00
Full Name of Contributor UNKNOWN						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CASH		
City GAHANNA		State OH	Zip Code 43230		M 1	D 0	Y 1	Y 7	Amount \$10.00
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Y	Amount

* 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 **\$695.00**