31	-A	
R.C.	3517.10	

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Contributor										
Full Name of Contributor	Name of Committee in Full Keeler, Longbrake, Lynaugh for G	— Grandview Hei	ghts							
Street Address						Registration Number, if PAC				
1431 W. First Ave	TimAdams									
State Zep Code N	Street Address	Employer	<u> </u>			Form (Cash, Ch	eck, etc.)			
Crandview Heights	1431 W. First Ave	<u> </u>						Check		
Registration Number, if PAC	_ ·	Star	te	Zip Code	1			Amount		
Street Address Employer/Occupation/Labor Organization*	· · ·		<u>H</u>	43212	0 7	0 9	1 5		500.00	
					Registra	ition Nur	nber, if F	AC		
2977 Palmetto St.										
State Zip Code Marker Zip Code Marker Zip Code Marker Zip Code Marker Zip Code Zip Z		Employer	Employer/Occupation/Labor Organization*					1	eck, etc.)	
Columbus								Check		
Parker Novak		l		· ·	1	l .	I .	Amount		
Parker Novak		0	Н	43204					150.00	
Employer/Occupation/Labor Organization*					Registra	tion Nu	nber, if P	AC		
State Zop Code State Zop Code M										
State		Employer	/Occup	pation/Labor Organization*	_					
West Chester								Check		
Full Name of Contributor Cheryl Zeiger	I -			I '				Amount	_	
Cheryl Zeiger Street Address		Tot	Н	45069					48.25	
Employer/Occupation/Labor Organization*					Registra	ition Nur	nber, if P	'AC	_	
The control of the			,							
State Zip Code M		Employer	pation/Labor Organization*					eck, etc.)		
Grandview Heights				· - :						
Full Name of Contributor Matt Hare Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check City State Zip Code M 0 7 1 7 1 5 96.80	·			1 ·	1			Amount	222.00	
Matt Hare			Н	43212				<u> </u>	200.00	
Street Address Employer/Occupation/Labor Organization*					Registra	ition Nur	nber, if P	AC		
State Zip Code M			10					10h 0h		
State Zip Code M		Employer	/Occup	pation/Labor Organization						
Upper Arlington	*			Ter Bods	1 .,		1 .,			
Registration Number, if PAC	l ·	1		·		_		Amount	06.80	
Street Address Employer/Occupation/Labor Organization* Check			H	43221					96.00	
Street Address 520 Tobacco Quay $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					Registra	ition Nui	nber, it m	AC		
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		Is-alayar	' ^	··· - D -b Oi	Ц.,			/Oh Ch): \	
State Zip Code M		Етрюует	Employer/Occupation/Labor Organization*					•	eck, etc.)	
Alexandria	- /	, Ctal		Iz- Cada	Li	<u> </u>	ı v			
Full Name of Contributor Matthew Shafer Street Address Street Address 529 Lamont St. #101 Check City Washington Full Name of Contributor Tony Gius Street Address Address Address Street Address A	•			'					145.25	
Matthew Shafer Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)	_		А	22314					145.55	
Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)					Registra	KIOH NU	noei, ii r	AL		
State Zip Code M D Y Amount		Employer	/Occur	nation/Labor Organization*	<u> </u>			Form /Cash Ch	ack atc)	
City State Zip Code M D Y Amount Washington D C 20010 0 7 1 8 1 5 96.80 Full Name of Contributor Tony Gius Registration Number, if PAC Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check 10704 Pinkney Lane State Zip Code M D Y Amount		Employer/Occupation/Labor Organization*							CCK, GLO.,	
Washington D C 20010 0 7 1 8 1 5 96.80 Full Name of Contributor Tony Gius Street Address 10704 Pinkney Lane Employer/Occupation/Labor Organization*		Stat	-	Izin Code	Ти	<u> </u>	Γγ			
Full Name of Contributor Tony Gius Street Address 10704 Pinkney Lane City Registration Number, if PAC Registration Number, if PAC Form (Cash, Check, etc.) Check Amount	-	i .			1			Anoun	96.80	
Tony Gius Street Address 10704 Pinkney Lane City Employer/Occupation/Labor Organization* Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check Amount	9			20010	1 -			PAC .	70.00	
Street Address 10704 Pinkney Lane State Zip Code M D Y Amount Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Check					negis.	KIOH III.	moçi, ii .	Α.		
10704 Pinkney Lane Check City State Zip Code M D Y Amount		Employer/Occupation/Labor Organization*						Form (Cash, Ch.	eck etc.)	
City State Zip Code M D Y Amount										
		Stat		Tzin Code	Тм	n n	Ιγ			
	[·			1 '		ľ		, 4	96.80	

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 \$ 1,334.00