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Statement of Contributions Received

Prescribed by Secretary of State 3/05

				HINDE CONTRACTOR OF THE					
Name of Committee in Full Citivens for Alicia Healy									
Full Name of Contributor Roland Lane	Registr			istration Number, if PAC					
Street Address 644 Che stershire Rd.	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City	State	Zip Code 43204	6 8	D 2 2	09	Amount 50.00			
Full Name of Contributor Mindy Lambert	C								
Mindy Lambert Street Address 1986 Kes wick Dr.	Employer/Occupa	ation/Labor Organization*			-	Form (Cash, Check, etc.)			
City Upper Arlington Full Name of Contributor	State OH	Zip Code 43aao	M 0 8	D 20	09	Amount 50.00			
Full Name of Contributor Robert Jones	Registration Number, if PA					.C			
Street Address 323 Sherwood Forest E.	Employer/Occupa				Form (Cash, Check, etc.)				
Columbus	State 0 H	Zip Code 4322 8	M 8	D 26	δ ⁹	Amount 25.00			
Full Name of Contributor Stephen Katona Registration Number, if PA									
Street Address 1650 Waterstone Ct.	Finniover/Occupation/Labor Organization*					Form (Cash, Check, etc.)			
Columbus	State	Zip Code 43235	M 06	a 9) 9	Amount 33.97			
Full Name of Contributor Joseph Bozzi Registration Number, if PAG						kamena and a sanda and a s			
Street Address jbozzi @ Ohio freedom.	Employer/Occupa				Form (Cash, Check, etc.)				
City Com	State	Zip Code	M 7	a 5	09	Amount 44.90			
Full Name of Contributor Clarence Mingo	Registration Number, if PAC								
Street Address 8406 Leisner Ave.	Employer/Occupa				Form (Cash, Check, etc.)				
City New Albary	State O H	Zip Code Y 30 54	M 7	a: 7	0 9	Amount 47.94			
Full Name of Contributor Sack Trot+ II		den en e	Registrati	on Num	ber, if PA	i.C			
Street Address 3782 HarboroughDr.	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)			
Gahanna	State O H	Zip Code 43230	M 0.9	DO	09	Amount 15.00			
Full Name of Contributor Christine Wightman Registration Number, if PAC									
Street Address 100 North St. Apt. 202		ation/Labor Organization*				Form (Cash, Check, etc.)			
Columbus	State O:H	Zip Code 43202	M 9	80	09	Amount 50 :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	S	-0:00				
<u>\$</u>		306.81				