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Statement of Contributions Received

Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full Re-Elect Becky Stinchcomb for May	or Committee							
Full Name of Contributor Bricker & Eckler LLP State PAC	Registration Number, if F OH 821	Registration Number, if PAC OH 821						
Street Address 100 S. Third St.	Employer/Occu	pation/Labor Organization	•	Form (Cash, Check, etc.) Check				
City Columbus	State OH	Zip Code 43215	1 0 2 9 1 1	Amount \$100.00				
Full Name of Contributor JPMorgan Chase & Co. PAC	Registration Number, if F C00128512	ХC						
Street Address 10 S. Dearborn St.	Employer/Occu	pation/Labor Organization*	Form (Cash, Check, etc.) check					
City Chicago	State 	Zip Code 60603	1 0 2 9 1 1	Amount \$1,000.00				
Full Name of Contributor Charles R. Porter Registration Number, if PAC								
Street Address 3230 Rocky Fork Blvd.	Employer/Occu	ipation/Labor Organization*		Form (Cash, Check, etc.) check				
City Gahanna	State OH	Zip Code 43230	$\begin{bmatrix} M & D & Y \\ 1 & 1 & 1 \\ \end{bmatrix} 2 \begin{bmatrix} Y & 1 \\ 1 & 1 \\ \end{bmatrix} 1$	Amount \$250.00				
Full Name of Contributor Steven Gieger Registration Number, if PA								
Street Address 65 Southwind Dr.	Employer/Occu	apation/Labor Organization*		Form (Cash, Check, etc.) check				
City Gahanna	Stațe OH	Zip Code 43230	M D Y	Amount \$1,000.00				
Full Name of Contributor Registration Number, if PAC Rae White								
Street Address 1744 Harrison Pond Dr.	Employer/Occi	apation/Labor Organization		Form (Cash, Check, etc.) PayPal				
City New Albany	State OH	Zip Code 43054	1 0 2 1 1 1	Amount \$100.00				
Full Name of Contributor Alvin Shuler Registration Number, if F								
Street Address 81 Savern Place				Form (Cash, Check, etc.) PayPal				
City Gahanna	State OH	Zip Code 43230	1 1 0 4 1 1	Amount \$50.00				
Full Name of Contributor Kristin Rosan								
Street Address 192 Farmwood Place	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.) PayPal				
City Gahanna	Staple OH	Zip Code 43230	M D Y 1 1	Amount \$100.00				
Full Name of Contributor Jennifer Price	<u>, , , , , , , , , , , , , , , , , , , </u>		Registration Number, if	PAC				
Street Address 1173 Rice Ave.	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.) PayPal				
City Gahanna	State OH	Zip Code 43230	M D Y	Amount \$100.00				

Page Total \$2,700.00

^{*} 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)]