31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Berry For Grove City								
Full Name of Contributor							**Registration Number, if PAC**	
Mark W. Altier								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
201 West Main Street	Miami County						check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Troy	OH	45373	07	11	11			100.00
Full Name of Contributor							**Registration Number, if PAC**	
Dr. Buzz Korth								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
1909 Creeks Crossing Ct	Ohio Chriopratic						check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Grove City	oh	43123	07	19	11			1,000.00
Full Name of Contributor							**Registration Number, if PAC**	
Mark Wiest								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
1282 Bannock Trl	Wayne County						check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Wooster	OH	44691	07	18	11			25.00
Full Name of Contributor							**Registration Number, if PAC**	
Lisa Zeigler								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
6198 Winnebago St.	Macentosh Co.						check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Grove City	oh	43123	07	05	11			500.00
Full Name of Contributor							**Registration Number, if PAC**	
Mary Ploetz								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
4460 Windrow	Retired						check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Grove City	Oh	43123	07	29	11			50.00
Full Name of Contributor							**Registration Number, if PAC**	
Timothy Suhayda								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
4490 Windrow	Electrician						check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Grove City	Oh	43123	06	23	11			20.00
Full Name of Contributor							**Registration Number, if PAC**	
William Blair								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
2738 Glenmont	Canton						check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Canton	oh	44708	07	29	11			100.00
Full Name of Contributor							**Registration Number, if PAC**	
Larry Jackson								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
5128 Apple Glen Trl	Retired							
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Grove City	Oh	43123	08	03	11			500.00

* 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 $ 2,295.00