

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Schottke for G.C.</u>						
Full Name of Contributor <u>Citizens for Cheryl Grossman</u>				Registration Number, if PAC <u>Larry Serman Treasurer</u>		
Street Address <u>3955 Brown Park Dr., Suite A</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>Check</u>		
City <u>Hilliard</u>	State <u>OH</u>	Zip Code <u>430026</u>	M <u>0</u>	D <u>8</u>	Y <u>15</u>	Amount <u>200.00</u>
Full Name of Contributor <u>Charlotte Alexander</u>				Registration Number, if PAC		
Street Address <u>2450 White Rd.</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>Check</u>		
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	M <u>0</u>	D <u>8</u>	Y <u>15</u>	Amount <u>50.00</u>
Full Name of Contributor <u>Daniel Menninger</u>				Registration Number, if PAC		
Street Address <u>1327 Davenport Lane</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>Check</u>		
City <u>Powell</u>	State <u>OH</u>	Zip Code <u>43065</u>	M <u>0</u>	D <u>8</u>	Y <u>15</u>	Amount <u>300.00</u>
Full Name of Contributor <u>Chris Roach</u>				Registration Number, if PAC		
Street Address <u>3980 Broadway</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>Check</u>		
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	M <u>0</u>	D <u>8</u>	Y <u>15</u>	Amount <u>50.00</u>
Full Name of Contributor <u>John Brant</u>				Registration Number, if PAC		
Street Address <u>2605 Bryan Cir</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>Check</u>		
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	M <u>0</u>	D <u>9</u>	Y <u>15</u>	Amount <u>30.00</u>
Full Name of Contributor <u>J.R. Blackwood</u>				Registration Number, if PAC		
Street Address <u>2699 Kenny Lane</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>Check</u>		
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	M <u>0</u>	D <u>9</u>	Y <u>15</u>	Amount <u>30.00</u>
Full Name of Contributor <u>Adam Slane</u>				Registration Number, if PAC		
Street Address <u>5330 Sawatch Dr</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>Check</u>		
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43228-5200</u>	M <u>0</u>	D <u>9</u>	Y <u>15</u>	Amount <u>25.00</u>
Full Name of Contributor <u>E. Michael Spiers</u>				Registration Number, if PAC		
Street Address <u>6173 Seneca Ct.</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>Check</u>		
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123-9721</u>	M <u>0</u>	D <u>8</u>	Y <u>15</u>	Amount <u>50.00</u>

* 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)]