31-A						
RC	3517	14				

## **Statement of Contributions Received**

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Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Ted Berry						
Full Name of Contributor Grace L Drake DBA Friends of Grace L Drake			Registration Number, if PAC			
	_ Drake					
Street Address 5954 Briardale Ln	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Solon	Strike OH	Zip Code 44139	0 8 1 1 1 6	Amount \$2,000.00		
Full Name of Contributor	:		Registration Number, if F	PAC		
Kathleen Ives						
Street Address 1954 New Market Dr	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Credit Card		
City	State	Zip Code	M D Y	Amount		
Grove City	ОН	43123	0 8 1 6 1 6	\$125.00		
Full Name of Contributor Registration Number, if PAC FOP Political Education Fund						
Street Address 6800 Schrock Hill Ct	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)		
				Check		
City Columbus	State OH	Zip Code 43229	0 8 1 5 1 6	Amount \$1,000.00		
Full Name of Contributor		1	Registration Number, if P	PAC		
Margaret B Huck						
Street Address	Employer/Occu	pation/Labor Organization	<del> </del>	Form (Cash, Check, etc.)		
1763 Morgan St	C	7 - C-1-		Check		
Wooster	OH	Zip Code 44691	0 8 1 1 1 6	Amount \$100.00		
Full Name of Contributor Registration Number, if PAC						
William Koester						
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)		
5651 Breezewood Dr				Check		
City Cincinnati	State OH	Zip Code 45248	0 8 1 8 1 6	Amount \$50.00		
Full Name of Contributor	·	<u> </u>	Registration Number, if P	PAC		
O.S.C.S.E.A / A.F.S.C.M.E.			LA292			
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)		
390 Worthington Rd, Ste. A	' '			Check		
City	State	Zip Code	M D Y	Amount		
Westerville	OH	43082	0 9 0 2 1 6	\$20,000.00		
Full Name of Contributor	•	<u>'                                      </u>	Registration Number, if P	AC		
AFSCME Ohio Council 8, AFL-CIO LA1273						
Street Address	Employer Occu	pation/Labor Organization		Form (Cash, Check, etc.)		
6800 North High St				Check		
City	State	Zip Code	M D Y	Amount		
Worthington	OH	43085	090216	\$2,500.00		
Full Name of Contributor  Registration Number, if PAC  James Moore						
Street Address	lineal according O	pation/Labor Organization		Form (Cash, Check, etc.)		
3400 Norwood St	Employer/Occu	ранови са уаптияноп		Credit Card		
City	State	Zip Code	M D Y	Amount		
Columbus	ОН	43224	0 8 3 0 1 6			

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)]

Page Total \$25,800.00