Statement of Contributions Received

	2
Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Bonnie Michael					
Full Name of Contributor			Registration Number, if PAC		
Joe Ann Douglass			L		
Street Address 307 W Dublin Granville Rd	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	0 9 0 1 1 5	Amount \$50.00	
Full Name of Contributor Michael E. Minister		_ 1_	Registration Number, if F	AC .	
Street Address 7022 Lansdowne Street	Employer/Occur	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check	
City Worhtington	State OH	Zip Code 43085	0 9 0 8 1 5	Amount \$100.00	
Full Name of Contributor Thomas E Carter	<u>. </u>		Registration Number, if F	Registration Number, if PAC	
Street Address 2178 Castle Crest Dr	Employer/Occu	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	0 9 1 2 1 5	Amount \$100.00	
Full Name of Contributor Marc Schare	R			PAC	
Street Address 2113 Selbourne Ct	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43016	0 9 0 9 1 5	Amount \$50.00	
Full Name of Contributor Registration Number, if PAC Elizabeth A Sommer					
Street Address 6930 Candace Place	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	0 8 2 6 1 5	Amount \$40.00	
Full Name of Contributor Bernice J Cooper	Registration Number, if P	Registration Number, if PAC			
Street Address 6353 Mar Min Ct	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	M, D, Yi 0 8 2 2 1 5	Amount \$25.00	
Full Name of Contributor Kenneth D Johnsen			Registration Number, if PAC		
Street Address 6760 Hayhurst St	Employer/Occup	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	M D Y Y O 8 2 2 1 5	Amount \$25.00	
Full Name of Committee Paula Brooks Committee			Registration Number, if P	AC	
Street Address 545 East Town Street	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	0 8 2 8 1 5	Amount \$250.00	

Page Total \$640.00

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)}