

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>CITIZENS FOR HAUGHN</b>						
Full Name of Contributor <b>NEIL ELAM</b>				Registration Number, if PAC		
Street Address <b>5945 GRANT RUN PL</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>STEVEN BAUERMEISTER</b>				Registration Number, if PAC		
Street Address <b>2064 RUNNING CREEK PL</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>1</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>GREGORY HRITZ</b>				Registration Number, if PAC		
Street Address <b>2733 CLARK DR</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>JEFFREY HAUGHN</b>				Registration Number, if PAC		
Street Address <b>420 16TH AVE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>INDIAN ROCKS BEACH</b>	State <b>FL</b>	Zip Code <b>33785</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>\$200.00</b>
Full Name of Contributor <b>GREGORY L. KING</b>				Registration Number, if PAC		
Street Address <b>3013 TREEBEND CIRCLE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>1</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>LONNIE R. SWEAZEY</b>				Registration Number, if PAC		
Street Address <b>2841 COLUMBUS ST</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>DENNIS HALL</b>				Registration Number, if PAC		
Street Address <b>4190 PATZER AVE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>2</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>TAMMY JOCHEM</b>				Registration Number, if PAC		
Street Address <b>4421 BRYSTON RD</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>2</b>	Amount <b>\$50.00</b>

\* 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 **\$525.00**