

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Fred Deskins, Jr. Republican Ward 1 Council Seat Committee									
Full Name of Contributor Fred Henderson Hole Sponsor						Registration Number, if PAC			
Street Address 940 S. Broadleigh Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check #1860			
City Columbus			State OH		Zip Code 43209		M D Y 0 3 0 9 1 0		Amount \$100.00
Full Name of Contributor Gary James Foursome Fees						Registration Number, if PAC			
Street Address P.O. Box 1009			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check # 1263			
City Reynoldsburg			State OH		Zip Code 43068		M D Y 0 4 2 2 1 0		Amount \$320.00
Full Name of Contributor John Noble Foursome Fees						Registration Number, if PAC			
Street Address 7880 Grandly Court			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check # 3260			
City Reynoldsburg			State OH		Zip Code 43068		M D Y 0 4 1 6 1 0		Amount \$300.00
Full Name of Contributor Brad McCloud 2 Golfers Fees						Registration Number, if PAC			
Street Address 120 Rosehill Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check # 3134			
City Reynoldsburg			State OH		Zip Code 43068		M D Y 0 4 2 4 1 0		Amount \$160.00
Full Name of Contributor William Sampson One Golfer Fee						Registration Number, if PAC			
Street Address 1065 Mastill Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check # 1243			
City Reynoldsburg			State OH		Zip Code 43068		M D Y 0 4 2 4 1 0		Amount \$80.00
Full Name of Contributor Tim Henderson Golfer Fee						Registration Number, if PAC			
Street Address 7201 Hoover Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check # 4129			
City Columbus			State OH		Zip Code 43146		M D Y 0 4 2 4 1 0		Amount \$80.00
Full Name of Contributor Darrell Kaufman Golfer Fee						Registration Number, if PAC			
Street Address 2857 Kool Air Way			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check # 1142			
City Columbus			State OH		Zip Code 43231		M D Y 0 4 2 4 1 0		Amount \$80.00
Full Name of Contributor James C. Pace Foursome Fees Note: 300.00 check, 20.00 Cash						Registration Number, if PAC			
Street Address 231 Ironclad Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check # 1284			
City Columbus			State OH		Zip Code 43213		M D Y 0 4 1 1 1 0		Amount \$320.00

* 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)]

Page Total **\$1,440.00**