

Statement of Contributions Received

Prescribed by Secretary of State 03/05

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Name of Committee in Full Zollars 4 Council							
Full Name of Contributor Pat Zollars						Registration Number, if PAC	
Street Address 6928 Retton Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Reynoldsburg			State OH		Zip Code 43068		Amount 10 -
Full Name of Contributor Pat Zollars						Registration Number, if PAC	
Street Address 6928 Retton Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Transfer	
City Reynoldsburg			State OH		Zip Code 43068		Amount 300 -
Full Name of Contributor Chris Long						Registration Number, if PAC	
Street Address 1675 Hatt Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Reynoldsburg			State OH		Zip Code 43068		Amount 100
Full Name of Contributor Billie Zollars						Registration Number, if PAC	
Street Address 67699 Pine Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City St Clairsville			State OH		Zip Code 43095		Amount 100
Full Name of Contributor Billie Zollars						Registration Number, if PAC	
Street Address 67699 Pine Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City St Clairsville			State OH		Zip Code 43095		Amount 100
Full Name of Contributor Pat Zollars						Registration Number, if PAC	
Street Address 6928 Retton Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Transfer	
City Reynoldsburg			State OH		Zip Code 43068		Amount 200
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City			State		Zip Code		Amount
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City			State		Zip Code		Amount

* 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 \$ 870.00