Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Committee to elect John Stewa	· mt					
Full Name of Contributor	ın		Regist	ration Nun	mber if P	AC .
John Stewart			1	ano	noci,	10
Street Address	Employer/Occu	1*			Form (Cash, Check, etc.)	
855 Bryn Mawr Drive	<u> </u>	ortation Execut				Cash
City City	State	Zip Code	М	D	Y	Amount
Gahanna	OF		019		1	
Full Name of Contributor	<u></u>	10-00		ration Nun		
Street Address	[Employer/Occi	upation/Labor Organization				Form (Cash, Check, etc.)
Street Address	Employen Occu	pation/Labor Organization	i .			Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor			Registr	ration Nun	nber, if PA	AC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Y	Amount
ull Name of Contributor Registration Number, if P					nber, if PA	AC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor		·	Registr	ration Nun	nber, if P/	AC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Y	Amount
	<u> </u>	, p				remoun.
Full Name of Contributor		<u> </u>	Registr	ration Nun	nber, if P/	AC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor	ull Name of Contributor Registration Number, if P.					AC .
Street Address	Employer/Occu	pation/Labor Organization	.*			Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor	!		Registr	ration Num	nber, if P/	<u> </u>
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount
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* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$	60.00