Page	8
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Statement of Contributions Received

Prescribed by Secretary of State 3/05

N. CO. view in Full		 -		_	_	
Name of Committee in Full						
Citizens for Jolley			Registration	n Numbe	r if PAC	
Full Name of Contributor			1,000		.,	
Ryan Jolley	Ir. 1 /O			_		Form (Cash, Check, etc.)
Street Address	Employer/Occu	pation/Labor Organization*				Credit Card
506 Flintwood Drive		- In: 0	1 7 1	D T	Y	Amount
City	State	Zip Code	M			5.00
Gahanna	<u>O</u> H	43230	0 2 (1 5	
Full Name of Contributor			Registration	n Numbe	t, II PAC	~
Ian Polster						n 16 1 6 1 111
Street Address	Employer/Occupation/Labor Organization*			1	Form (Cash, Check, etc.)	
2003 Timberline Trl						Credit Card
City	State	Zip Code	M I	D		Amount
Springfield	OIH	44503			1 5	100.00
Full Name of Contributor	<u> </u>		Registratio	n Numbe	n, if PA	¢
Ryan Koch						
Street Address	Employer/Occu	mation/Labor Organization*				Form (Cash, Check, etc.)
5843 Garden Hill Lane	_					Credit Card
City	State	Zip Code	M	D	Y	Amount
Columbus	O H	43017	0 2	<u> 1 8 </u>	1 5	100.00
Full Name of Contributor			Registratio	n Numbe	n, if PA	С
Rachel Gough						
Street Address	Employer/Occi	upation/Labor Organization*				Form (Cash, Check, etc.)
1755 King Ave, Apt D	1				ŀ	Credit Card
City	State	Zip Code	М	D	Y	Amount
Columbus	OIH	43212	012	2 2	1 5	100.00
Full Name of Contributor		<u></u>	Registratio	on Numbe	r, if PA	С
Louis Capobianco						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
60 E Pawnee Dr						Credit Card
City	State	Zip Code	М	Ð	Y	Amount
Powell	OIH	43065	012	213	1 5	50.00
Full Name of Contributor		1000	Registratio		er, if PA	C
Zach Williams						
Street Address	Employer/Occ	upation/Labor Organization*				Form (Cash, Check, etc.)
9 Riverpointe Rd	' '					Credit Card
City	State	Zip Code	М	Đ	Y	Amount
	NIY		0 2	216	115	100.00
Hastings on Hudson Full Name of Contributor	1 1/1 1	10700	Registration	on Numb	er, if PA	ı.C
Aftab Pureval Street Address	Employer/Occ	upation/Labor Organization*				Form (Cash, Check, etc.)
	Empoyen Socupation and Sammero.					Credit Card
111 Grafield Place, Apt 1206	State	Zip Code	М	D	Y	Amount
City	0 1			1 7	115	250.00
Cincinnati	1012	45202	Registrati			
Full Name of Countries.						
William DeMora	Emala: an/Oac	cupation/Labor Organization*			_	Form (Cash, Check, etc.)
Street Address	Lithio ciroccabation Communication			Credit Card		
100 Warren St	State	Zip Code	М	D	- Y	Amount
City	1	. '	013	1 7	1 5	1
Columbus	1 0 1	adidates If contributor is self-				

* 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 \$	805.00