

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full LEVYFACTS.COM										
Full Name of Contributor Carol Hribar						Registration Number, if PAC				
Street Address 387 Mainsail Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit			
City Westerville			State O H		Zip Code 43081		M 0 1	D 3 1	Y 1 2	Amount 500.00
Full Name of Contributor Steven Smith						Registration Number, if PAC				
Street Address 535 Pointview Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit			
City Westerville			State O H		Zip Code 43081		M 0 1	D 3 1	Y 1 2	Amount 50.00
Full Name of Contributor Roderick Clay						Registration Number, if PAC				
Street Address 433 Mary Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit			
City Westerville			State O H		Zip Code 43081		M 0 2	D 0 1	Y 1 2	Amount 200.00
Full Name of Contributor Robert Moone						Registration Number, if PAC				
Street Address 9050 Robinhood Circle			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit			
City Westerville			State O H		Zip Code 43082		M 0 2	D 0 3	Y 1 2	Amount 250.00
Full Name of Contributor M. Jo Ruhl						Registration Number, if PAC				
Street Address 279 Merriss Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check			
City Westerville			State O H		Zip Code 43081		M 0 2	D 0 4	Y 1 2	Amount 50.00
Full Name of Contributor James Barnhard						Registration Number, if PAC				
Street Address 5950 Commonwealth Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check			
City Westerville			State O H		Zip Code 43082		M 0 2	D 0 4	Y 1 2	Amount 50.00
Full Name of Contributor John Overley						Registration Number, if PAC				
Street Address 20 Spring Hollow Ln			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check			
City Westerville			State O H		Zip Code 43081		M 0 2	D 0 4	Y 1 2	Amount 70.00
Full Name of Contributor Marilyn Piepho						Registration Number, if PAC				
Street Address 147 N. State St.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check			
City Westerville			State O H		Zip Code 43081		M 0 2	D 0 4	Y 1 2	Amount 50.00

* 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 appear. [R.C. 3517.10(B)(4)]