

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Committee to Elect John Stearns Sr. Reynoldsburg City Council</b>									
Full Name of Contributor <b>Cerise Allen</b>						Registration Number, if PAC			
Street Address <b>101 Stornoway Dr W</b>			Employer/Occupation/Labor Organization* <b>Private Investigator</b>				Form (Cash, Check, etc.) <b>GoFundMe.com</b>		
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43213</b>		M <b>0</b>	D <b>2</b>	D <b>2</b>	Y <b>8</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>Nikesa Jones</b>						Registration Number, if PAC			
Street Address <b>5738 Harborside Dr</b>			Employer/Occupation/Labor Organization* <b>Trainer</b>				Form (Cash, Check, etc.) <b>GoFundMe.com</b>		
City <b>Tampa</b>		State <b>FL</b>	Zip Code <b>33615</b>		M <b>0</b>	D <b>3</b>	D <b>0</b>	Y <b>7</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>Alishia Lee</b>						Registration Number, if PAC			
Street Address <b>56 Hunters Ct</b>			Employer/Occupation/Labor Organization* <b>Recruiting Operations Manager</b>				Form (Cash, Check, etc.) <b>GoFundMe.com</b>		
City <b>Amelia</b>		State <b>OH</b>	Zip Code <b>45102</b>		M <b>0</b>	D <b>3</b>	D <b>0</b>	Y <b>7</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Jamie Knue</b>						Registration Number, if PAC			
Street Address <b>328 E 262nd St</b>			Employer/Occupation/Labor Organization* <b>Self-Employed</b>				Form (Cash, Check, etc.) <b>GoFundMe.com</b>		
City <b>Euclid</b>		State <b>OH</b>	Zip Code <b>44132</b>		M <b>0</b>	D <b>3</b>	D <b>2</b>	Y <b>1</b>	Amount <b>\$20.00</b>
Full Name of Contributor <b>Gail Tate-Johnson</b>						Registration Number, if PAC			
Street Address <b>108 N Virginialee Rdf</b>			Employer/Occupation/Labor Organization* <b>Retired</b>				Form (Cash, Check, etc.) <b>GoFundMe.com</b>		
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43209</b>		M <b>0</b>	D <b>4</b>	D <b>0</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State <b>OH</b>	Zip Code		M	D	D	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State <b>OH</b>	Zip Code		M	D	D	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State <b>OH</b>	Zip Code		M	D	D	Y	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)]