Statement of Contributions Received

Page 2_____

Prescribed by Secretary of State 03/05

Name of Committee in Full Teater for Hilliard					
Full Name of Contributor Michael Gillotti			Registration Number, if PAC		
Street Address 3864 Dayspring Drive	Employer/Occuş	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 4 1 9 1 7	Amount \$200.00	
Full Name of Contributor Joseph T. Martin			Registration Number, if PAC		
Street Address 8601 Morris Road	Employer/Occup	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 4 1 9 1 7	Amount \$100.00	
Full Name of Contributor Gwen T. McCartt		•	Registration Number, if F	Registration Number, if PAC	
Street Address 5068 Waycroft Ct.	Employer/Occur	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 4 1 9 1 7	Amount \$75.00	
Edward A. Sarkel			Registration Number, if F	AC	
Street Address 4734 River Run Drive	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 4 1 9 1 7	Amount \$100.00	
Full Name of Contributor James S. Teater Registration Number, if PAC					
Street Address 2904 Morrison Street	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Houston	TX State	Zip Code 77009	0 4 1 9 1 7	Amount \$500.00	
Martha H. Teater			Registration Number, if F	Registration Number, if PAC	
Street Address 146 Megan Drive	Employer/Occup	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Clyde	State NC	Zip Code 28721	0 4 1 9 1 7	Amount \$100.00	
Full Name of Contributor Registration : Stanton A. West			Registration Number, if F	AC	
Street Address 4770 Shire Ridge Road W	Employer/Occup	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 4 1 9 1 7	Amount \$100.00	
Full Name of Contributor Joseph E. Mueller			Registration Number, if F	AC	
Street Address 5248 Windsock Court	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	M D Y 7	Amount \$75.00	

^{*} 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 also appear. [R.C. 3517.10(B)(4)]