

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full WORTHINGTON CITIZENS FOR A QUALITY COMMUNITY!									
Full Name of Contributor Sandra R Byers						Registration Number, if PAC			
Street Address 139 Saint Julien St			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Worthington		State OH		Zip Code 43085		M 0	D 4	Y 0	Amount \$25.00
Full Name of Contributor James G May						Registration Number, if PAC			
Street Address 6011 Weatherburn Pl			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Worthington		State OH		Zip Code 43085		M 0	D 4	Y 0	Amount \$100.00
Full Name of Contributor Brickler & Eckler LLP PAC						Registration Number, if PAC OH821			
Street Address 100 S High St			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Columbus		State OH		Zip Code 43215		M 0	D 4	Y 0	Amount \$100.00
Full Name of Contributor Rosemary Ebner Pomeroy						Registration Number, if PAC			
Street Address 273 Heischman Ave			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Worthington		State OH		Zip Code 43085		M 0	D 4	Y 0	Amount \$100.00
Full Name of Contributor James Lorimer						Registration Number, if PAC			
Street Address 1215 Worthington Woods Blvd			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Worthington		State OH		Zip Code 43085		M 0	D 4	Y 0	Amount \$300.00
Full Name of Contributor David M Norstrom						Registration Number, if PAC			
Street Address 787 Oxford St			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Worthington		State OH		Zip Code 43085		M 0	D 4	Y 0	Amount \$200.00
Full Name of Contributor Margaret B Huff						Registration Number, if PAC			
Street Address 90 Wilson Dr			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Worthington		State OH		Zip Code 43085		M 0	D 4	Y 0	Amount \$100.00
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)		
City		State OH		Zip Code		M	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)]