Page	<u>5</u>	

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full		<u> </u>		
Citizens for Rachael Dorothy				
Full Name of Contributor			Registration Number, if	PAC
Bostwick Wyman				
Street Address	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.)
				Check
242 W. New England	State	Zip Code	M D Y	Amount
	OH	43085	0 9 0 7 1	3 25.00
Worthington Full Name of Contributor		10000	Registration Number, if	
				:
Linda Wyman	Employer/Occur	ation/Labor Organization*	<del> </del>	Form (Cash, Check, etc.)
Street Address	Limployen			Check
242 W. New England	State	Zip Code	M D Y	Amount
City	1	43085	0 9 0 7 1	3 25.00
Worthington	OIH	43063	Registration Number, if	<u> </u>
Full Name of Contributor			Registration 11.	,
Anita Beck	Te 1 /0-	oation/Labor Organization*		Form (Cash, Check, etc.)
Street Address	Employer/Occup	anolyLapor Organization		Check
6840 Downs Street		la: O.J.	M D Y	Amount
City	State	Zip Code		3 15.00
Worthington	0 H	43085	0 9 0 8 1 Registration Number, if	
Full Name of Contributor			Registration (Aumber, 6	Inc
Thomas Beck				Form (Cash, Check, etc.)
Street Address	Employer/Occur	pation/Labor Organization*		Check
6840 Downs Street				
City	State	Zip Code	M D Y	Amount 15 00
Worthington	OH	43085	0 9 0 8 1	3 15.00
Full Name of Contributor			Registration Number, it	PAC
Ron Rybak				
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
668 Seabury Drive				Check
City	State	Zip Code	M D Y	
Worthington	O   H	43085	1 0 0 8 1	
Full Name of Contributor			Registration Number, i	ΓPAC
Shirley Rybak				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
668 Seabury Drive	+			Check
City	State	Zip Code	M D Y	4
Worthington	OIH	43085	1 0 0 8 1	3 15.00
Full Name of Contributor			Registration Number,	f PAC
Iim Hunter				
Street Address	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)
		,		Check
673 Mohawk Street, Suite 400	State	Zip Code	M D `	/ Атюшт
City	OTE	i -	1 0 3 1 1	100.00
Columbus	- 0 -	40200	Registration Number,	
Full Name of Contributor				
John O'Keeffe	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address	Employer Cocupation Cargametrica		PayPal	
6784 Joslyn Place	State	Zip Code	M D	Y Amount
City	1		0 9 1 5 1	1 400.00
Worthington	1 0 7	1 45085		

\* 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 \$	310.00