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AMENDED Statement of Contributions Received

Prescribed by Secretary of State 03/05

		<u> </u>		
Name of Committee in Full Citizens for Hawk		İ		
Full Name of Contributor		t t	Registration Number, if I	PAC
Shannon Hay				
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
3280 Belgreen Dr				Check
City Grove City	State OH	Zip Code 43123	0 6 2 5 1 1	Amount \$140.00
Full Name of Contributor Greg Richards		<u> </u>	Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
793 Aldengate Dr				Check
City Galloway	State OH	Zip Code 43119	M D Y 0 6 2 5 1 1	Amount \$140.00
Full Name of Contributor			Registration Number, if	PAC
Leonard Gorsuch				
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
1100 Stone Run Ct				Check
City Lancaster	State OH	Zip Code 43130	0 6 2 5 1 1	Amount \$140.00
Full Name of Contributor		· · · · · · · · · · · · · · · · · · ·	Registration Number, if	PAC
Julie Kilbarger				
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
7566 Jenkins Dr				Check
City Canal Winchester	State OH	Zip Code 43110	0 6 2 5 1 1	Amount \$140.00
Full Name of Contributor			Registration Number, if	PAC
				IP (Cb Ch.ol. ata)
Street Address	Employer/Occi	pation/Labor Organization		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Amount
	OH			
Full Name of Contributor			Registration Number, if	PAC
Street Address	Employer/Occi	upation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	M D Y	Amount
Full Name of Contributor			Registration Number, if	PAC
Street Address	1. 1			Form (Cash, Check, etc.)
Street Address	Employer/Cxc	upation/Labor Organization*		
City	State OH	Zip Code	M D Y	Amount
Full Name of Contributor	1		Registration Number, if	PAC
Street Address	Employer/Occ	upation/Labor Organization		Form (Cash, Cheek, etc.)
City	State OH	Zip Code	M D Y	Amount

Page Total \$560.00

^{*}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)]