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## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full			<del></del>					-
Franklin County Libertarian Party								
Full Name of Contributor				Registra	nion Num	ber, if PA	.C	_
Mark Noble								
Street Address	Employe	r/Occupa	ntion/Labor Organization*	<u> </u>			Form (Cash, Checl	k, etc.)
723 Springs Drive	ECOT					Pavpal		
City	St	aie	Zip Code	М	D	Y	Amount	
Columbus	0	Н	43214	1   2	016	1 4		17.76
Full Name of Contributor					tion Num		C	
Christopher Hancock								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
6487 Birchview DR N							Pavpal	
City .	St	ate	Zip Code	М	D	Y	Amount	
Reynoldsburg	0	Н	43068	1 2	1 0	1 4		17.76
Full Name of Contributor				Registra	tion Num	ber, if PA	.C	
Richard Kesserling								
Street Address			ntion/Labor Organization*				Form (Cash, Check, etc.)	
189 Rainswept Dr	AT	<u> </u>	lecom Specialist				Paypal	
City	St	ate	Zip Code	M	D	Y	Amount	
Galloway	0	Н	43119	1 2	1 4	1 4		25.00
Full Name of Contributor Registration Number, if PAC						-		
Street Address	Employer/Occupation/Labor Organization* Form (Ca			Form (Cash, Checl	ic, etc.)			
City	St	ate	Zip Code	M	D	Y	Amount	
Full Name of Contributor		_	1	Registra	tion Num	ber, if PA		
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)							
	1						į	
City	St	ate	Zip Code	М	D	Y	Amount	-
	1 .		l		İ			
Full Name of Contributor				Registra	tion Num	ber, if PA	C	
Street Address	Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				k etc.)			
Successive	Lampioye	поссира	ator bussi organization				i om (ousi, our	4,
City	St	ate	Zip Code	М	D	Y	Amount	
				1				
Full Name of Contributor				Registra	tion Num	ber, if PA	i.C	
Street Address	Employe	т/Оссира	ation/Labor Organization*				Form (Cash, Checl	k, etc.)
						·		
City	St	ate	Zip Code	М	D	Y	Amount	
						1 (57)	<u> </u>	
Full Name of Contributor Registration Number, if PAC								
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)							
			l					
City	St	ate	Zip Code	М	D	Y	Amount	
		<u> </u>						
equived for contributions from individuals over \$100 to statewide and ger		1	4 16	مطه أمسه		and the	af the	

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 \$	60.52