

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Hawk												
Full Name of Contributor Roger Baker						Registration Number, if PAC						
Street Address 5752 Ennishannon Pl			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Dublin		State OH		Zip Code 43016		M 0		D 8		Y 2 3 1 1		Amount \$300.00
Full Name of Contributor Patrick Kelly						Registration Number, if PAC						
Street Address 2918 Valley Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Cuyahoga Falls		State OH		Zip Code 44223		M 0		D 8		Y 2 3 1 1		Amount \$500.00
Full Name of Contributor Linda Laymon						Registration Number, if PAC						
Street Address 2176 Melbury Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Columbus		State OH		Zip Code 43221		M 1		D 2		Y 2 1 1 1		Amount \$250.00
Full Name of Contributor Greg Richards						Registration Number, if PAC						
Street Address 793 Aldengate			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Galloway		State OH		Zip Code 43119		M 1		D 2		Y 2 1 1 1		Amount \$250.00
Full Name of Contributor Dan LeVesque						Registration Number, if PAC						
Street Address 4179 Ashgrove Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Grove City		State OH		Zip Code 43123		M 1		D 2		Y 2 1 1 1		Amount \$250.00
Full Name of Contributor Ross Chambers						Registration Number, if PAC						
Street Address 12364 Thoroughbred Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Pickerington		State OH		Zip Code 43147		M 1		D 2		Y 2 6 1 1		Amount \$130.00
Full Name of Contributor Doug Gallant						Registration Number, if PAC						
Street Address 511 Evening St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) EFT					
City Worthington		State OH		Zip Code 43085		M 1		D 2		Y 2 6 1 1		Amount \$250.00
Full Name of Contributor						Registration Number, if PAC						
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)					
City		State		Zip Code		M		D		Y		Amount
		OH										

* 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)]

Page Total **\$1,930.00**