

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Safety First							
Full Name of Contributor John C King					Registration Number, if PAC		
Street Address 1023 Willow Creek Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Plain City	State Ohio	Zip Code 43064	M 0	D 3	Y 17	Amount \$100.00	
Full Name of Contributor Baker + Associates Insurance					Registration Number, if PAC		
Street Address 3968 Brown Park Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State Ohio	Zip Code 43026	M 0	D 3	Y 17	Amount \$100.00	
Full Name of Contributor Thomas S. Rankin					Registration Number, if PAC		
Street Address 5515 Scioto Darby Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State Ohio	Zip Code 43026	M 0	D 3	Y 17	Amount \$50.00	
Full Name of Contributor Committee To Elect Donald Schonhardt					Registration Number, if PAC		
Street Address 5307 Franklin Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State Ohio	Zip Code 43026	M 0	D 3	Y 17	Amount \$2,000.00	
Full Name of Contributor In source					Registration Number, if PAC		
Street Address 4700 Northwest Parkway		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State Ohio	Zip Code 43026	M 0	D 3	Y 17	Amount \$500.00	
Full Name of Contributor Frank L. Carrier, Jr.					Registration Number, if PAC		
Street Address 4437 Prairie Pine Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State Ohio	Zip Code 43026	M 0	D 3	Y 17	Amount \$100.00	
Full Name of Contributor Heritage, Inc.					Registration Number, if PAC		
Street Address 622 W. Fair Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Lancaster	State Ohio	Zip Code 43130	M 0	D 3	Y 17	Amount \$100.00	
Full Name of Contributor Kenworth of Columbus					Registration Number, if PAC		
Street Address 4039 Lyman Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State Ohio	Zip Code 43026	M 0	D 3	Y 26	Amount \$100.00	

* 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)]