

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Westerville/Blendon Fire Levy									
Full Name of Contributor Scott H. Baumgartner						Registration Number, if PAC			
Street Address 1065 Denman Court			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 3	D 0 6	Y 1 0	Amount 100.00			
Full Name of Contributor Linda Bokros						Registration Number, if PAC			
Street Address 642 Berkeley Pl. N.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 3	D 1 5	Y 1 0	Amount 100.00			
Full Name of Contributor Bernard E. Ingles						Registration Number, if PAC			
Street Address 384 Abbotsbury Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0 3	D 1 5	Y 1 0	Amount 200.00			
Full Name of Contributor Lawrence C. Jenkins						Registration Number, if PAC			
Street Address 211 E. Schrock Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 3	D 2 0	Y 1 0	Amount 100.00			
Full Name of Contributor Anne H. Gonzales						Registration Number, if PAC			
Street Address 335 Wildwood Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 3	D 2 0	Y 1 0	Amount 50.00			
Full Name of Contributor Michael Heyeck						Registration Number, if PAC			
Street Address 113 Ormsbee Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 3	D 2 2	Y 1 0	Amount 100.00			
Full Name of Contributor James H. Tharp						Registration Number, if PAC			
Street Address 18 Logan Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 3	D 2 2	Y 1 0	Amount 50.00			
Full Name of Contributor David A. Collinsworth						Registration Number, if PAC			
Street Address 995 Stonehenge Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Tipp City	State O H	Zip Code 45371	M 0 3	D 2 2	Y 1 0	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 800.00