

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Alicia Healy							
Full Name of Contributor Eve Tomassini						Registration Number, if PAC	
Street Address 3075 Leads Rd.		Employer/Occupation/Labor Organization* Homemaker				Form (Cash, Check, etc.) ck.	
City Columbus	State OH	Zip Code 43221	M 07	D 28	Y 09	Amount 50.00	
Full Name of Contributor Joseph Kuhn						Registration Number, if PAC	
Street Address 4211 St. Rt. 66		Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) ck.	
City Minster	State OH	Zip Code 45865	M 08	D 04	Y 09	Amount 20.00	
Full Name of Contributor Dan Starkey						Registration Number, if PAC	
Street Address 7107 Marcy Rd. Nw		Employer/Occupation/Labor Organization* Truck Driver				Form (Cash, Check, etc.) ck.	
City Lancaster	State OH	Zip Code 43130	M 08	D 10	Y 09	Amount 50.00	
Full Name of Contributor Thomas Parrish						Registration Number, if PAC	
Street Address 3285 Meadowbrook Dr.		Employer/Occupation/Labor Organization* City Worker				Form (Cash, Check, etc.) ck.	
City Lancaster	State OH	Zip Code 43130	M 08	D 10	Y 09	Amount 50.00	
Full Name of Contributor W.P. Jacob						Registration Number, if PAC	
Street Address 8326 Autumnwood Way		Employer/Occupation/Labor Organization* Business owner Lawyer				Form (Cash, Check, etc.) ck.	
City Dublin	State OH	Zip Code 43017	M 08	D 12	Y 09	Amount 100.00	
Full Name of Contributor D.L. Auman						Registration Number, if PAC	
Street Address 5715 Coonpath Rd.		Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) ck.	
City Carroll	State OH	Zip Code 43112	M 08	D 13	Y 09	Amount 10.00	
Full Name of Contributor Joanne Kemmerer						Registration Number, if PAC	
Street Address 2441 Kenilworth Ave.		Employer/Occupation/Labor Organization* Homemaker				Form (Cash, Check, etc.) ck.	
City Cincinnati	State OH	Zip Code 45212	M 08	D 12	Y 09	Amount 25.00	
Full Name of Contributor Jeffrey A. Williams						Registration Number, if PAC	
Street Address 3431 Lowell Dr.		Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) ck.	
City Columbus	State OH	Zip Code 43204	M 08	D 23	Y 09	Amount 10.00	

* 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 \$ ~~0.00~~
\$ 315.00