

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Preston Stearns For Reynoldsburg							
Full Name of Contributor Roosevelt Williams					Registration Number, if PAC		
Street Address 1336 Onslow Dr.		Employer/Occupation/Labor Organization* Janitor			Form (Cash, Check, etc.) Cash		
City Columbus	State OH	Zip Code 43204	M 0	D 9	Y 1	Amount \$100.00	
Full Name of Contributor F. Levoyce Huggins					Registration Number, if PAC		
Street Address 335 Brice Rd.		Employer/Occupation/Labor Organization* State of Ohio			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 9	Y 1	Amount \$50.00	
Full Name of Contributor Preston Stearns Error Entrance					Registration Number, if PAC		
Street Address 1020 Matterhorn Dr.		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 1	Amount \$100.00	
Full Name of Contributor Ashton M. Grigley					Registration Number, if PAC		
Street Address 986 Sandrock Ave.		Employer/Occupation/Labor Organization* Retail Clerk/Student			Form (Cash, Check, etc.) Cash		
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 1	Amount \$50.00	
Full Name of Contributor Larry Brown					Registration Number, if PAC		
Street Address 6973 Nocturne Rd.		Employer/Occupation/Labor Organization* State of Ohio			Form (Cash, Check, etc.) Cash		
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 1	Amount \$26.00	
Full Name of Contributor Marlene A. Wirth					Registration Number, if PAC		
Street Address 1029 Northfield Pl. N		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 1	Amount \$50.00	
Full Name of Contributor Preston Stearns					Registration Number, if PAC		
Street Address 1020 Matterhorn Dr.		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Cash		
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 1	Amount \$100.00	
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)]