

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full The Committee For A Better Clinton Township							
Full Name of Contributor Roberta S. Olt					Registration Number, if PAC		
Street Address 1710 Hess Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check # 4920		
City Columbus	State O H	Zip Code 43212	M 0 8	D 1 7	Y 1 6	Amount 100.00	
Full Name of Contributor John T. Coneglio					Registration Number, if PAC		
Street Address 1824 Hess Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check # 5255		
City Columbus	State O H	Zip Code 43212	M 0 8	D 2 8	Y 1 6	Amount 200.00	
Full Name of Contributor Jane M. Margiotta					Registration Number, if PAC		
Street Address 1671 Hess Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check # 3239		
City Columbus	State O H	Zip Code 43212	M 0 8	D 2 8	Y 1 6	Amount 25.00	
Full Name of Contributor Infinity General Merchandise Corp					Registration Number, if PAC		
Street Address 3462 Cleveland Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check # 7503		
City Columbus	State O H	Zip Code 43224	M 0 8	D 3 0	Y 1 6	Amount 1,000.00	
Full Name of Contributor Michael H. Jones					Registration Number, if PAC		
Street Address 750 Solaris CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Blacklick	State O H	Zip Code 43004	M 0 8	D 3 1	Y 1 6	Amount 100.00	
Full Name of Contributor Roberta S. Olt					Registration Number, if PAC		
Street Address 1710 Hess Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check # 4923		
City Columbus	State O H	Zip Code 43212	M 0 9	D 0 7	Y 1 6	Amount 100.00	
Full Name of Contributor Carl J. Reardon					Registration Number, if PAC		
Street Address 1869 Elmore Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check # 5951		
City Columbus	State O H	Zip Code 43224	M 0 9	D 0 7	Y 1 6	Amount 100.00	
Full Name of Contributor Brad Theodor					Registration Number, if PAC		
Street Address 1824 Audrey St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Columbus	State O H	Zip Code 43224	M 0 9	D 1 5	Y 1 6	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 \$ 1,725.00