

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Elect Bryan Steward							
Full Name of Contributor Jack Green					Registration Number, if PAC		
Street Address 2223 Viburnum Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Cols	State OH	Zip Code 43235	M 0	D 5	Y 2	Amount 50	
Full Name of Contributor Crystal C Bryant					Registration Number, if PAC		
Street Address 1390 Halfhill Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Cols	State OH	Zip Code 43207	M 0	D 5	Y 2	Amount 25	
Full Name of Contributor Hanifah Kambon					Registration Number, if PAC		
Street Address 63 North Ohio Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Cols	State OH	Zip Code 43203	M 0	D 5	Y 2	Amount 50	
Full Name of Contributor Stefanie L Steward Young					Registration Number, if PAC		
Street Address 2570 Berwick Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Cols	State OH	Zip Code 43209	M 0	D 5	Y 2	Amount 50	
Full Name of Contributor OAPSE AFSCME Turnaround Ohio PAC LA					Registration Number, if PAC		
Street Address 6805 Oak Creek Dr		Employer/Occupation/Labor Organization* 1267			Form (Cash, Check, etc.) check		
City Cols	State OH	Zip Code 43229	M 1	D 0	Y 7	Amount 2500.-	
Full Name of Contributor OAPSE AFSCME Turnaround Ohio PAC LA 1209					Registration Number, if PAC		
Street Address 6805 Oak Creek Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43229	M 0	D 6	Y 1	Amount 2500.-	
Full Name of Contributor SEIU Local 1 Ohio PCE					Registration Number, if PAC		
Street Address 1368 E 34th St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Cleveland	State OH	Zip Code 44114	M 0	D 9	Y 1	Amount 500	
Full Name of Contributor Teachers for Better Schools					Registration Number, if PAC		
Street Address 929 E Broad St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Cols	State OH	Zip Code 43205	M 0	D 6	Y 2	Amount 2000	

* 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)]

Page Total **7675**
\$0.00