

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Jolley							
Full Name of Contributor Jennifer A. Palguta					Registration Number, if PAC		
Street Address 2687 Northmont Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Blacklick	State O H	Zip Code 43004	M 0 8	D 1 5	Y 1 1	Amount 50.00	
Full Name of Contributor John Rensink					Registration Number, if PAC		
Street Address 517 S. 5th Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus	State O H	Zip Code 43206	M 0 8	D 1 5	Y 1 1	Amount 50.00	
Full Name of Contributor Alexis Ortiz					Registration Number, if PAC		
Street Address 4191 Triple Crown Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Davie	State F L	Zip Code 33330	M 0 8	D 1 5	Y 1 1	Amount 25.00	
Full Name of Contributor Jody Cox					Registration Number, if PAC		
Street Address 955 Avir Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 8	D 1 5	Y 1 1	Amount 25.00	
Full Name of Contributor Preston C. Demouchet					Registration Number, if PAC		
Street Address 2807 North Glebe Road, 284		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Arlington	State V A	Zip Code 22207	M 0 8	D 1 6	Y 1 1	Amount 25.00	
Full Name of Contributor Donovan C. Bezer					Registration Number, if PAC		
Street Address 27 Atlantis Terrace		Employer/Occupation/Labor Organization* Stryker, Tams & Dill LLP			Form (Cash, Check, etc.) Credit Card		
City Freehold	State N J	Zip Code 07728	M 0 8	D 1 6	Y 1 1	Amount 25.00	
Full Name of Contributor Michael A. Twigg					Registration Number, if PAC		
Street Address 532 Moon Glow Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Gahanna	State O H	Zip Code 43230	M 0 8	D 1 6	Y 1 1	Amount 100.00	
Full Name of Contributor Arlene Polster-Moore					Registration Number, if PAC		
Street Address 7841 Waggoner Chase Blvd.		Employer/Occupation/Labor Organization* Data Recognition Corp.			Form (Cash, Check, etc.) Check		
City Blacklick	State O H	Zip Code 43004	M 0 8	D 2 2	Y 1 1	Amount 25.00	

* 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)]