

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Elect Eddie Pauline											
Full Name of Contributor Michael F. Colley						Registration Number, if PAC					
Street Address 536 S. High Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City Columbus		State OH	Zip Code 43215		M 1	D 0	Y 2	Y 7	Y 0	Y 5	Amount \$250.00
Full Name of Contributor Jo Ann Davidson						Registration Number, if PAC					
Street Address 6639 Forrester Way			Employer/Occupation/Labor Organization* Co Chairman, RNC				Form (Cash, Check, etc.) Check				
City Renoldsburg		State OH	Zip Code 43088		M 1	D 0	Y 2	Y 9	Y 0	Y 5	Amount \$100.00
Full Name of Contributor Roger W. Tracy						Registration Number, if PAC					
Street Address 5057 Heath Gate Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City New Albany		State OH	Zip Code 43084		M 0	D 9	Y 1	Y 6	Y 0	Y 5	Amount \$75.00
Full Name of Contributor Jack D. Miner						Registration Number, if PAC					
Street Address 114 W. 2nd Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City Columbus		State OH	Zip Code 43201		M 1	D 0	Y 2	Y 5	Y 0	Y 5	Amount \$250.00
Full Name of Contributor						Registration Number, if PAC					
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City		State OH	Zip Code		M	D	Y	Y	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC					
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City		State OH	Zip Code		M	D	Y	Y	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC					
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City		State OH	Zip Code		M	D	Y	Y	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC					
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City		State OH	Zip Code		M	D	Y	Y	Y	Y	Amount

* 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)]