Statement of Contributions Received

Prescribed by Secretary of State 3/05

					200000000000000000000000000000000000000			
Name of Committee in Full								
Committee for Wade Steen								
ull Name of Contributor Registration Number, if				er, if PA	С			
Charles Herrera								
Street Address	Employer/Occupa	ation/Labor Organization*	v.			Form (Cash, Che	eck, etc.)	
1175 Brittany Lane						Check		
City	State	Zip Code	M	D	Y	Amount		
Upper Arlington	O H	43220	0 9	2 5	0 9		250.00	
Full Name of Contributor			Registrat	ion Numb	er, if PA	С		
Peter Edwards, Jr.								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Che	eck, etc.)			
2375 Tremont Road						Check		
City	State	Zip Code	М	D	Y	Amount		
Columbus	O H	43212	0 9	2 5	0 9		50.00	
Full Name of Contributor			Registrat	CONTINUES OF THE PARTY OF THE P	on Number, if PAC			
Cheryl Godard								
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	eck, etc.)	
2030 Cambridge Blvd.					Check			
City	State	Zip Code	М	D	Y	Amount		
Upper Arlington	ОН	43221	0 9	2 5	0 9		100.00	
Full Name of Contributor				tion Numb		С		
Autumn Obrien								
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	eck, etc.)	
2495 Sherwin Road				Check				
City	State	Zip Code	М	D	Y	Amount		
Columbus	O H	43221	0 9	2 5	0 9		100.00	
Full Name of Contributor				tion Numl		С		
Leslie Junk								
Street Address	Employer/Occup	ation/Labor Organization*			9.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000 (0.000	Form (Cash, Ch	eck, etc.)	
2400 Cambridge Blvd.	- Improj vi. o vonpanos maro - o - o - o - o - o - o - o - o - o -			Check				
City	State	Zip Code	M	D	Y	Amount	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Columbus	ОН	43221	0 9	2 5	0 9		30.00	
Full Name of Contributor		10		tion Numb	ATTENDED TO STATE OF THE PARTY	.C		
Thomas Haeussler								
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Ch	eck, etc.)	
2505 Sherwin Road		v				Check		
City	State	Zip Code	M	D	Y	Amount		
Columbus	OH	43221	nla	2 8	0 9		25.00	
Full Name of Contributor		10221	Registra	tion Num	ber, if PA	.C		
Nathan Dappen								
Street Address	Employer/Occur	ation/Labor Organization*	L			Form (Cash, Ch	eck, etc.)	
2354 Dorset Road	Emproj on Goodpation Education Organismos			Check				
City	State	Zip Code	M	D	Y	Amount		
1 ·	OH	43221	0 9	1 .	0 9	II.	50.00	
Columbus Full Name of Contributor		J TU441		tion Num	VALUE AND DESCRIPTION OF THE PARTY OF T		20.00	
			1.081000	114411	, 1			
Robin Hall Street Address	Employer/Occur	nation/Lahor Organization*				Form (Cash, Ch	eck etc)	
	Employer/Occupation/Labor Organization*			Check				
4141 Randmore Ct.	State	Zip Code	М	D	ΙΥ	Amount		
City		i "	1 .	1 .	1	1	50.00	
Columbus	O H	43220	0 9	1218	0 9	I	50.00	

Page Total \$	655.00

^{*} 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)]