Page	2
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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

en e						uniconstation contra		
Name	of Committee in Full							
	Bobbie Mershon for Council			7		en la		
Full Na	ame of Contributor			Registra	ition Nun	nber, if P	AC	
	Bobbie Mershon			<u> </u>			(C)	
Street	Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
	257 Washington St.			-ç	,		Cash	
City		State	Zip Code	М	D	Y	Amount	
	Canal Winchester	0 H	43110	0 9	0   1	0 9		100.00
Full N	ame of Contributor			Registra	ition Nur	nber, if F	AC	
	Marilyn Rush Ekelberry							
Street	Address	Employer/Occu				Form (Cash, Che	eck, etc.)	
	124 Beaty Ct.	accing and the contract of the				Check		
City		State	Zip Code	М	D	Υ	Amount	
	Canal Winchester	ОН	43110	0 9	0 1	0   9		35.00
Full N	ame of Contributor	one of the second secon		Registra	tion Nur	nber, if F	PAC	
	Reno Robinette							
Street	Address	Employer/Occu	pation/Labor Organization*	-L	CONTRACTOR CONTRACTOR	000000000000000000000000000000000000000	Form (Cash, Che	eck, etc.)
	10 W. Mound St.		-				Check	
City	7.0 A 4. 14TO PETER CAR.	State	Zip Code	] M	D	Υ	Amount	
	Canal Winchester	ОН	43110	0   9	1	0 9		35.00
Eull M	ame of Contributor		20220	na construction de la construction	tion Nur	TO SERVICE STREET, STR	PAC	
i dii i vi	Dick Weiser							
Stroot	t Address	Employer/Occu	pation/Labor Organization*	1			Form (Cash, Che	eck etc )
Suge		Employer/Occu	pation/ Labor Organization				Check	ock, occ.)
0	103 E. Fairfield St.	Chata	Izin Codo	T M	D	ΙŸ	Amount	
City	***	State	Zip Code	M	l		Amount	350.00
-	Canal Winchester	OH	43110	0 9	0 1	0 9		250.00
Full N	ame of Contributor			Registra	ation Nur	nber, if I	AC	
	Robert Fealy					Nickel processed in the later is the		
Street	Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
	7834 Brooks Bend Ct.						Check	
City		State	Zip Code	М	D	Υ	Amount	
	Canal Winchester	OH	43110	0 9	0 7	0 9		25.00
Full N	ame of Contributor			Registra	ation Nur	nber, if I	PAC	
	Jeanette Schneider							
Stree	t Address	Employer/Occupation/Labor Organization*			ng ing krayada ii galaddan ga sia		Form (Cash, Che	eck, etc.)
	153 E. Waterloo St.						Check	
City		State	Zip Code	М	D	Y	Amount	***************************************
	Canal Winchester	0   H	43110	0 9	0 9	0 9		50.00
Full N	ame of Contributor			Registra	ation Nu	nber, if I	PAC	
	Bob Garbe							
Stree	t Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Ch	eck, etc.)
	1007 Groveport Rd.	2					Check	
City	1007 Gioveporerra.	State	Zip Code	М	D	ΙΥ	Amount	
City	Canal Winchester	OH	43110	0 9	ł	1		100.00
Full M	ame of Contributor		TEG EAST	ndaammaain	ation Nu	decementario accessors	PAC	LOUIVU
rull 1V				negiatio	acioni ivui	inver, ii i		
Caura	Melinda Ross	Employer/O	pation/Labor Organization*			***************************************	Form (Cash, Ch	ock etc.)
otree.	t Address	Employer/Occu	pation/Labor Organization*				1	cck, etc.)
	184 E. Waterloo St.	<u> </u>	12: 0.1	<del></del>	<u> </u>	<del>1</del>	Check	
City		State	Zip Code	M	D	Y	Amount	40.00
	Canal Winchester	0 H	43110	0 9	0 4	0 9		10.00

Page Total	\$ 605.00

<sup>\*</sup> 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)]