

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Franklin County Green Party						
Full Name of Contributor Tekla Tylor-Lagway				Registration Number, if PAC N/A		
Street Address 6100 Kingshill Drive		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43205	M 0	D 6	Y 2	Amount \$20.00
Full Name of Contributor Rebecca Calhoun				Registration Number, if PAC N/A		
Street Address 2626 Dover Rd.		Employer/Occupation/Labor Organization* Jackson Hewitt Tax Service			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43209	M 0	D 6	Y 2	Amount \$15.00
Full Name of Contributor Jonathon T. Kratoville				Registration Number, if PAC N/A		
Street Address 1620 W. First Apt. 2		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43212	M 0	D 8	Y 1	Amount \$10.00
Full Name of Contributor Kevin Buettner				Registration Number, if PAC N/A		
Street Address 376 S. 18th Ave. Apt. D		Employer/Occupation/Labor Organization* Student			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43205	M 1	D 0	Y 0	Amount \$50.00
Full Name of Contributor Kevin Buettner				Registration Number, if PAC N/A		
Street Address 376 S. 18th Ave. Apt. D		Employer/Occupation/Labor Organization* Student			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43205	M 1	D 1	Y 0	Amount \$25.00
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	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	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	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)]

Page Total \$120.00