

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paini for Trustee							
Full Name of Contributor Laura Morningstar					Registration Number, if PAC		
Street Address 7576 Placid Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Worthington	State O H	Zip Code 43085	M 1 0	D 1 9	Y 0 9	Amount 20.00	
Full Name of Contributor Chris Maeda					Registration Number, if PAC		
Street Address 215 S Broadway		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Salem	State N H	Zip Code 03079	M 1 0	D 1 9	Y 0 9	Amount 100.00	
Full Name of Contributor Wilson Browning					Registration Number, if PAC		
Street Address 204 E Blenkner St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43206	M 1 0	D 2 0	Y 0 9	Amount 25.00	
Full Name of Contributor Jason Hipsher					Registration Number, if PAC		
Street Address 12235 Woodrow Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Pickerington	State O H	Zip Code 43147	M 1 0	D 2 0	Y 0 9	Amount 20.00	
Full Name of Contributor George Carr					Registration Number, if PAC		
Street Address 7482 Williamson Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Canal Winchester	State O H	Zip Code 43110	M 1 0	D 2 4	Y 0 9	Amount 50.00	
Full Name of Contributor Donald Kaler					Registration Number, if PAC		
Street Address 3746 Coco Lake Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Coconut Creek	State F L	Zip Code 33073	M 1 0	D 2 4	Y 0 9	Amount 100.00	
Full Name of Contributor John Seeds					Registration Number, if PAC		
Street Address 8031 Mvers Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Centerburg	State O H	Zip Code 43011	M 1 0	D 2 1	Y 0 9	Amount 75.00	
Full Name of Contributor Carl Heister					Registration Number, if PAC		
Street Address 1084 Amanda Norther Rd NW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Canal Winchester	State O H	Zip Code 43110	M 1 0	D 2 2	Y 0 9	Amount 15.00	

* 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)]

Page Total \$ 405.00