

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full SOUTH WEST AGAINST TAXES (SWAT)							
Full Name of Contributor OHIO Mechanical, Inc.					Registration Number, if PAC		
Street Address P.O. Box 595		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City Grove City	State OH	Zip Code 43123	M 06	D 30	Y 09	Amount \$100.00	
Full Name of Contributor BARBARA J. STEWART					Registration Number, if PAC		
Street Address 2345 LOIS DR.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City Grove City	State OH	Zip Code 43123	M 06	D 30	Y 09	Amount 50.00	
Full Name of Contributor JACK D. FRAZEE					Registration Number, if PAC		
Street Address 6306 Mound View Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City Grove City	State OH	Zip Code 43123	M 07	D 01	Y 09	Amount 20.00	
Full Name of Contributor PATRICIA OTT					Registration Number, if PAC		
Street Address 1957 KYGER DR.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City Columbus	State OH	Zip Code 43228	M 07	D 01	Y 09	Amount 20.00	
Full Name of Contributor UNKNOWN					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH		
City	State	Zip Code	M 07	D 16	Y 09	Amount 60.00	
Full Name of Contributor Dr. Kenneth Writzel					Registration Number, if PAC		
Street Address 5340 LAMBERT RD.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City Grove City	State OH	Zip Code 43123	M 07	D 16	Y 09	Amount 1000.00	
Full Name of Contributor Charles Brothers Asphalt Sealing					Registration Number, if PAC		
Street Address 2462 Northern Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City Grove City	State OH	Zip Code 43123	M 07	D 16	Y 09	Amount 50.00	
Full Name of Contributor Robin D. Starett					Registration Number, if PAC		
Street Address 4335 Waterside Pl.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City Grove City	State OH	Zip Code 43123	M 07	D 16	Y 09	Amount 50.00	

* 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 \$ 0.00
\$1350