

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full The Central Ohio Restaurant Association Political Action Committee												
Full Name of Contributor Richard M. Kaplan						Registration Number, if PAC						
Street Address 169 Lake Bluff Drive			Employer/Occupation/Labor Organization* G&J Pepsi. Owner				Form (Cash, Check, etc.) check 3925					
City Columbus		State OH		Zip Code 43235		M 0		D 8		Y 3 1 1 0		Amount \$500.00
Full Name of Contributor Hootless LLC dba Tip Top Kitchen and Cocktails						Registration Number, if PAC						
Street Address 73 E. Gay Street			Employer/Occupation/Labor Organization* restaurant				Form (Cash, Check, etc.) check 3631					
City Columbus		State OH		Zip Code 43215		M 0		D 8		Y 1 7 1 0		Amount \$500.00
Full Name of Contributor Scott Heimlich						Registration Number, if PAC						
Street Address 1474 Linwood Avenue			Employer/Occupation/Labor Organization* restaurant owner				Form (Cash, Check, etc.) check 1143					
City Columbus		State OH		Zip Code 43206		M 0		D 8		Y 1 0 1 0		Amount \$200.00
Full Name of Contributor Wiles, Boyle, Burkholder & Bringardner Co, LPA - PAC						Registration Number, if PAC CP-1058						
Street Address 300 Spruce Street			Employer/Occupation/Labor Organization* law firm				Form (Cash, Check, etc.) check 1772					
City Columbus		State OH		Zip Code 43215		M 0		D 8		Y 1 9 1 0		Amount \$500.00
Full Name of Contributor Wiles, Boyle, Burkholder & Bringardner Co, LPA - PAC						Registration Number, if PAC CP-1058						
Street Address 300 Spruce Street			Employer/Occupation/Labor Organization* law firm				Form (Cash, Check, etc.) check 1773					
City Columbus		State OH		Zip Code 43215		M 0		D 8		Y 1 9 1 0		Amount \$500.00
Full Name of Contributor Daniel T. Reese III						Registration Number, if PAC						
Street Address 1631 Birdsong Court			Employer/Occupation/Labor Organization* The Bradford School, Director				Form (Cash, Check, etc.) check 4982					
City Blacklick		State OH		Zip Code 43004		M 0		D 9		Y 0 1 1 0		Amount \$125.00
Full Name of Contributor Robert J. Kramer						Registration Number, if PAC						
Street Address 196 W. Riverglen Dr.			Employer/Occupation/Labor Organization* EDCI, Consultant				Form (Cash, Check, etc.) check 5029					
City Worthington		State OH		Zip Code 43085		M 0		D 8		Y 3 0 1 0		Amount \$25.00
Full Name of Contributor Elizabeth Lessner						Registration Number, if PAC						
Street Address 2653 Glen Echo Drive			Employer/Occupation/Labor Organization* restaurant owner				Form (Cash, Check, etc.) check 96635018					
City Columbus		State OH		Zip Code 43202		M 0		D 8		Y 1 9 1 0		Amount \$250.00

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$2,600.00**