

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Schottke for G C						
Full Name of Contributor Susan K + Larry D. Sutton				Registration Number, if PAC		
Street Address 3379 Marshrun Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 08	D 10	Y 13	Amount 25.⁰⁰
Full Name of Contributor Bradley A. + Patricia Adams				Registration Number, if PAC		
Street Address 3330 Grovepark Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 08	D 09	Y 13	Amount 50.⁰⁰
Full Name of Contributor Larry C. + K. Susan Corbin				Registration Number, if PAC		
Street Address 4460 Hoover Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 08	D 09	Y 13	Amount 500.⁰⁰
Full Name of Contributor Marc Wurtzman				Registration Number, if PAC		
Street Address 6515 Eagle Point Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Blacklick	State Ohio	Zip Code 43004	M 09	D 01	Y 13	Amount 25.⁰⁰
Full Name of Contributor Mark R. + Jeanette List				Registration Number, if PAC		
Street Address 4596 Bent Creek Pl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 08	D 30	Y 13	Amount 25.⁰⁰
Full Name of Contributor Richard L. + Shelah Stage				Registration Number, if PAC		
Street Address 2733 Woodgrove Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 09	D 03	Y 13	Amount 100.⁰⁰
Full Name of Contributor George K. Jr + Sandra L. Langer				Registration Number, if PAC		
Street Address 3323 Park Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 08	D 30	Y 13	Amount 50.⁰⁰
Full Name of Contributor Michael R + Brandi C. Linder				Registration Number, if PAC		
Street Address 5300 Meadow Grove Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 08	D 30	Y 13	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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$ **825.⁰⁰**