

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full CITIZENS FOR WESTERVILLE							Registration Number, if PAC	
Full Name of Contributor UNITED HEALTHCARE SERVICES, INC							Form (Cash, Check, etc.) CHECK	
Street Address P.O. Box 1459 MN005-N100			Employer/Occupation/Labor Organization HEALTH INSURANCE			Amount 11,500.00		
City MINNEAPOLIS			State MN		Zip Code 55440-1459		M D Y 09/19/08	
Full Name of Contributor BRIAN GOFF							Registration Number, if PAC	
Street Address 2048 QUAIL RIDGE ST							Form (Cash, Check, etc.) CASH	
City COLUMBUS			State OH		Zip Code 43229		M D Y 09/19/08	
Full Name of Contributor NANCY REISTER							Registration Number, if PAC	
Street Address 217 SAINT ANTOINE ST							Form (Cash, Check, etc.) CHECK	
City WORTHINGTON			State OH		Zip Code 43085-2244		M D Y 09/23/08	
Full Name of Contributor G. DAVID LINDIMORE							Registration Number, if PAC	
Street Address 8256 SNEAD WAY							Form (Cash, Check, etc.) CHECK	
City WESTERVILLE			State OH		Zip Code 43082-8066		M D Y 09/24/08	
Full Name of Contributor MICHAEL E. HOOPER							Registration Number, if PAC	
Street Address 2452 MECCA RD							Form (Cash, Check, etc.) CHECK	
City COLUMBUS			State OH		Zip Code 43224		M D Y 09/25/08	
Full Name of Contributor BAKER HOSTETLER							Registration Number, if PAC	
Street Address 65 E. STATE ST, STE 101							Form (Cash, Check, etc.) CHECK	
City COLUMBUS			State OH		Zip Code 43215		M D Y 10/09/08	
Full Name of Contributor							Registration Number, if PAC	
Street Address							Form (Cash, Check, etc.)	
City			State OH		Zip Code		M D Y	
Full Name of Contributor							Registration Number, if PAC	
Street Address							Form (Cash, Check, etc.)	
City			State OH		Zip Code		M D Y	

1810

9114

300
9129

1000
1019

* 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 \$2810.00