Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Demro				
Full Name of Contributor			Registration Number, if	PAC
Fletcher Hastings			<u> </u>	
Street Address	Employer/Occu	upation/Labor Organization		Form (Cash, Check, etc.)
748 Jonsof Court				Check
City Gahanna	State OH	Zip Code 43230	M D Y 0 9 0 5 1 3	1
Full Name of Contributor		 	Registration Number, if I	PAC
David Platt				
Street Address 535 Haversham Drive	Employer/Occu	upation/Labor Organization*	<u> </u>	Form (Cash, Check, etc.)
City	Stoke	· 6.1.	THE TREE VI	Cash
Gahanna	State OH	Zip Code 43230	M D Y O 9 0 9 1 3	Amount 3 \$10.00
Full Name of Contributor		70200	Registration Number, if I	
George Wehrley			Registration (viewers,	PAC
Street Address	Employer/Occv	upation/Labor Organization*		Form (Cash, Check, etc.)
430 Langford Court				Check
City Gahanna	State	Zip Code 43230	M D Y	Amount \$20.00
Full Name of Contributor	ОН	43200	0 9 1 1 1 3	
Full Name of Contributor Al Shuler			Registration Number, if	PAC
Street Address	Employer/Occi	upation/Labor Organization*		Form (Cash, Check, etc.)
81 Savern Place		panetrion		Check
City	State	Zip Code	M D Y 0 9 0 5 1 3	Amount
Gahanna	ОН	43230		Vicaias
Full Name of Contributor Jay Waugh			Registration Number, if I	PAC
Jay vvaugn Street Address				Charle ato V
Street Address 599 Wickham Way	Employer/Occur	ipation/Labor Organization		Form (Cash, Check, etc.)
City	State	Zip Code	M D Y	Check
Gahanna	OH State	43230	0 9 0 1 1 3	Amount \$ \$50.00
Full Name of Contributor		1.00	Registration Number, if I	
Herman Belcher			D	.nc
Street Address	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.)
1148 Rice Avenue		pator		Check
City	State	Zip Code	0 9 2 0 1 3	Amount
Gahanna	ОН	43230	092013	\$50.00
Full Name of Contributor			Registration Number, if I	PAC
Chuck Fearing				
Street Address 431 Langford Court	Employer/Occur	pation/Labor Organization*		Form (Cash, Check, etc.)
431 Langford Court	Centra			Check
City Gahanna	State OH	Zip Code 43230	0 9 2 3 1 3	
Full Name of Contributor Jim McGregor			Registration Number, if F	PAC
Street Address	Employer/Occu	pation/I,abor Organization*		Form (Cash, Check, etc.)
180 Academy Court	1	Marion rice		Online
City	State	Zip Code	M D Y	Amount
Gahanna	OH	43230	0 9 2 5 1 3	\$100.00

Page Total \$365.00

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)]