

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>The Central Ohio Restaurant Association Political Action Committee</b>							
Full Name of Contributor <b>Breads of the World, LLC - Judy Ketner Dollison</b>					Registration Number, if PAC <b>N/A</b>		
Street Address <b>2433 South Hanley Road</b>		Employer/Occupation/Labor Organization* <b>Restaurant Management</b>			Form (Cash, Check, etc.) <b>check 7704</b>		
City <b>St. Louis</b>	State <b>MO</b>	Zip Code <b>63144</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>\$125.00</b>	
Full Name of Contributor <b>Brian Scheren</b>					Registration Number, if PAC <b>N/A</b>		
Street Address <b>244 Brownstone Ct.</b>		Employer/Occupation/Labor Organization* <b>Restaurant Management</b>			Form (Cash, Check, etc.) <b>credit card</b>		
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	M <b>0</b>	D <b>9</b>	Y <b>1</b>	Amount <b>\$125.00</b>	
Full Name of Contributor <b>Kevin Landis</b>					Registration Number, if PAC <b>N/A</b>		
Street Address <b>112 Chandler Ave.</b>		Employer/Occupation/Labor Organization* <b>Restaurant Management</b>			Form (Cash, Check, etc.) <b>credit card</b>		
City <b>London</b>	State <b>OH</b>	Zip Code <b>43140</b>	M <b>0</b>	D <b>9</b>	Y <b>1</b>	Amount <b>\$125.00</b>	
Full Name of Contributor <b>Larry Clark</b>					Registration Number, if PAC <b>N/A</b>		
Street Address <b>224 Old Spring Lane</b>		Employer/Occupation/Labor Organization* <b>Catering Management</b>			Form (Cash, Check, etc.) <b>credit card</b>		
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43017</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>\$125.00</b>	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b>OH</b>	Zip Code	M	D	Y	Amount	

\* 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)]