

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>COMMITTEE FOR THE COLUMBUS ZOO LEVY</b>											
Full Name of Contributor <b>J. RANDALL SCHOEDINGER</b>						Registration Number, if PAC					
Street Address <b>2267 TREMONT ROAD</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>				
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43221</b>		M <b>0</b>	D <b>6</b>	Y <b>2</b>	Y <b>8</b>	Y <b>1</b>	Y <b>5</b>	Amount <b>\$500.00</b>
Full Name of Contributor <b>TERRI KEPES</b>						Registration Number, if PAC					
Street Address <b>1640 SHELLEY COURT</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>				
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43235</b>		M <b>0</b>	D <b>6</b>	Y <b>2</b>	Y <b>8</b>	Y <b>1</b>	Y <b>5</b>	Amount <b>\$300.00</b>
Full Name of Contributor <b>DAVID ETZKORN</b>						Registration Number, if PAC					
Street Address <b>1640 SHELLEY COURT</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>				
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43235</b>		M <b>0</b>	D <b>6</b>	Y <b>2</b>	Y <b>8</b>	Y <b>1</b>	Y <b>5</b>	Amount <b>\$300.00</b>
Full Name of Contributor <b>EDWIN OVERMAYER</b>						Registration Number, if PAC					
Street Address <b>2480 STONEHAVEN PL</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>				
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43220</b>		M <b>0</b>	D <b>6</b>	Y <b>2</b>	Y <b>2</b>	Y <b>1</b>	Y <b>5</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>RANDALL E. JUNG</b>						Registration Number, if PAC					
Street Address <b>910 BLUFF RIDGE ROAD</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>				
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43235</b>		M <b>0</b>	D <b>6</b>	Y <b>2</b>	Y <b>6</b>	Y <b>1</b>	Y <b>5</b>	Amount <b>\$250.00</b>
Full Name of Contributor <b>JAMES KUNK</b>						Registration Number, if PAC					
Street Address <b>7298 ROSEGATE PL</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>				
City <b>DUBLIN</b>		State <b>OH</b>	Zip Code <b>43017</b>		M <b>0</b>	D <b>6</b>	Y <b>2</b>	Y <b>4</b>	Y <b>1</b>	Y <b>5</b>	Amount <b>\$100.00</b>
Full Name of Contributor						Registration Number, if PAC					
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City		State	Zip Code		M	D	Y	Y	Y	Y	Amount
Full Name of Contributor <b>COLLEEN STALF</b>						Registration Number, if PAC					
Street Address <b>1022 RIVER RD.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>				
City <b>OSTRANDER</b>		State <b>OH</b>	Zip Code <b>43061</b>		M <b>0</b>	D <b>7</b>	Y <b>2</b>	Y <b>2</b>	Y <b>1</b>	Y <b>5</b>	Amount <b>\$1,000.00</b>

\* 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 **\$2,550.00**