

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Page 4

Name of Committee in Full COMMITTEE FOR THE COLUMBUS ZOO LEVY											
Full Name of Contributor MARY L. ROSE						Registration Number, if PAC					
Street Address 579 OLENTANGY BLVD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City WORTHINGTON		State OH	Zip Code 43085		M 0	D 7	Y 0	Y 4	Y 1	Y 5	Amount \$1,000.00
Full Name of Contributor CONNIE R. WOODBURN						Registration Number, if PAC					
Street Address 9761 ERIN WOODS DRIVE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City DUBLIN		State OH	Zip Code 43017		M 0	D 7	Y 0	Y 5	Y 1	Y 5	Amount \$1,000.00
Full Name of Contributor GILMAN KIRK						Registration Number, if PAC					
Street Address 2125 ACKLEY PL			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASHIER'S CHECK					
City COLUMBUS		State OH	Zip Code 43215		M 0	D 7	Y 0	Y 8	Y 1	Y 5	Amount \$500.00
Full Name of Contributor ROBET D. WEISMAN						Registration Number, if PAC					
Street Address 7277 PENNEYROYAL PL			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City DUBLIN		State OH	Zip Code 43017		M 0	D 6	Y 1	Y 8	Y 1	Y 5	Amount \$500.00
Full Name of Contributor WILLIAM HOY						Registration Number, if PAC					
Street Address 3945 HEADLEY'S MILL RD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City PATASKALA		State OH	Zip Code 43062		M 0	D 7	Y 0	Y 2	Y 1	Y 5	Amount \$500.00
Full Name of Contributor LARRY DILL						Registration Number, if PAC					
Street Address 7901 GREENSIDE LANE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City COLUMBUS		State OH	Zip Code 43235		M 0	D 7	Y 0	Y 1	Y 1	Y 5	Amount \$125.00
Full Name of Contributor MARK R. CHAMBERS						Registration Number, if PAC					
Street Address 5790 SPRINGBURN			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) WIRE					
City DUBLIN		State OH	Zip Code 43017		M 0	D 6	Y 3	Y 0	Y 1	Y 5	Amount \$125.00
Full Name of Contributor LAURA D. BYRNE						Registration Number, if PAC					
Street Address 1100 BROADVIEW AVE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City COLUMBUS		State OH	Zip Code 43212		M 0	D 7	Y 0	Y 1	Y 1	Y 5	Amount \$100.00

* 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 **\$3,850.00**