Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Walsh For Bexley				
Full Name of Contributor Mary Holcomb			Registration Number, if P	AC
Street Address 5815 Rushwood Drive	Employer/Occi	upation/Labor Organization*	- 4	Form (Cash, Check, etc.) Cash
City Dublin	State OH	Zip Code 43017	0 9 0 6 1 7	Amount \$10.00
Full Name of Contributor			Registration Number, if P	AC
Susan Weyand			J	
Street Address 255 Ceramic Drive	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43214	0 9 1 0 1 7	Amount \$50.00
Full Name of Contributor Tracie Baum			Registration Number, if PAC	
Street Address 689 Vernon Rd.	Employer/Occu	pation/Labor Organization	-	Form (Cash, Check, etc.) Anedot
City Bexley	State OH	Zip Code 43209	0 9 0 6 1 7	Amount \$10.00
Full Name of Contributor Registration Number, is Jessica Saluke				AC
Street Address 836 S. Roosevelt Ave	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Anedot
City Bexley	State OH	Zip Code 43209	0 9 0 5 1 7	Amount \$20.00
Full Name of Contributor Jessica Willis			Registration Number, if P.	AC
Street Address 826 S. Cassingham Rd.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Anedot
City Bexley	Stake OH	Zip Code 43209	0 9 0 4 1 7	Amount \$50.00
Full Name of Contributor Tyson Ardo			Registration Number, if Pa	AC
Street Address 394 Glenmont Ave.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Anedot
City Columbus	State OH	Zip Code 43214	0 9 0 6 1 7	Amount \$100.00
Full Name of Contributor Lisa Kelley			Registration Number, if Pa	AC
Street Address 834 S. Cassingham Rd.	Employer/Occu	Employer/Occupation/Labor Organization*		
City Bexley	Stalte OH	Zip Code 43209	M D Y 0 9 0 6 1 7	Amount \$50.00
Full Name of Contributor Marybeth Camboni			Registration Number, if Pa	
Street Address 840 S. Remington Rd.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Bexley	State OH	Zip Code 43209	M D Y O 9 0 6 1 7	Amount \$10.00

Page Total \$300.00

^{*}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)]