

FIRST NAME	MID DLE NA ME	LAST NAME	S UF FI X	CONTRIBUTING ENTITY	PAC REGISTR ATION NUMBER	ADDRESS	CITY	ST AT E	ZIP	EMPLOYER OCCUPATION OR LABOR ORGANIZATION	FORM OF CONTRIB UTION	DATE OF CONTRIB UTION	AMOUNT
Brian		Metzbower		(Reimbursement of cash for change)		14 E. Gay Street	Columbus	OH	43215		cash	1/21/2012	\$ 500.00
Jonithon		Lacross		(uncleared check voided)		219 Frebis Avenue	Columbus	OH	43206		Check	6/29/2011	\$ 2,500.00
										TOTAL PAGE			\$ 3,000.00