

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>KEEP HILLIARD BEAUTIFUL</b>									
Full Name of Contributor <b>ROBERT MCNAUGHTON</b>						Registration Number, if PAC			
Street Address <b>3753 SCIOTO RUN BLVD.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>50.00</b>		
Full Name of Contributor <b>EDWARD A. SARKEL</b>						Registration Number, if PAC			
Street Address <b>4734 RIVER RUN DRIVE</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>150.00</b>		
Full Name of Contributor <b>ANDREW TEATER</b>						Registration Number, if PAC			
Street Address <b>3837 DASYSRING DR.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>1,000.00</b>		
Full Name of Contributor <b>MICHAEL J. VEDRA</b>						Registration Number, if PAC			
Street Address <b>4267 SHIRE LANDING RD.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>150.00</b>		
Full Name of Contributor <b>TIMOTHY WOOD</b>						Registration Number, if PAC			
Street Address <b>3514 MARK TWAIN DR.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>200.00</b>		
Full Name of Contributor <b>DENNIS P. WILLIAMSON</b>						Registration Number, if PAC			
Street Address <b>5720 BEECHWOOD COURT</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>100.00</b>		
Full Name of Contributor <b>C. WAID SPIDELL</b>						Registration Number, if PAC			
Street Address <b>4682 PRESTIGE LANE</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>100.00</b>		
Full Name of Contributor <b>CHARLES F. RAMSEY</b>						Registration Number, if PAC			
Street Address <b>3182 STOUBENBURGH DR.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>HILLIARD</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43026</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>40.00</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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 1,790.00