

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full COMMITTEE TO RE-ELECT BUCK AND EARMAN							
Full Name of Contributor Craig and Diane Coleman					Registration Number, if PAC		
Street Address 2995 Landen Farm Road West		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 0 2	Y 0 9	Amount 40.00	
Full Name of Contributor Committee for Judge Schneider					Registration Number, if PAC		
Street Address 865 Macon Alley		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43206	M 1 0	D 0 2	Y 0 9	Amount 200.00	
Full Name of Contributor Doug Maggied					Registration Number, if PAC		
Street Address 8982 Roberts Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Galloway	State O H	Zip Code 43119	M 1 0	D 0 8	Y 0 9	Amount 40.00	
Full Name of Contributor Dennis and Donna Swenson					Registration Number, if PAC		
Street Address 4824 Bellann Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43221	M 1 0	D 0 8	Y 0 9	Amount 100.00	
Full Name of Contributor James and Suzanne Barbeau					Registration Number, if PAC		
Street Address 5953 Pondview Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 1 6	Y 0 9	Amount 20.00	
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	Amount	
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	Amount	
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	Amount	

* 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 \$ **400.00**