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## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Ted Berry						
Full Name of Contributor			Registration Number, if	PAC		
W. Henry Hauser, Jr						
Street Address 400 Fairway Blvd	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43213	M D Y	Amount \$150.00		
Full Name of Contributor			Registration Number, if	PAC		
Michael H Keenan						
Street Address	Employer/Occu	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
7103 Coventry Woods Dr City	State	Zip Code	M D Y	Amount		
Dublin	ОН	43017	102116	<u>'</u>		
Full Name of Contributor Julie B Lindemann			Registration Number, if	PAC		
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)		
1660 Ridgway Place		1	M D Y	Check Amount		
City Grandview Heights	State OH	Zip Code 43212	$\begin{bmatrix} 1 & 0 & 2 & 1 & 1 \end{bmatrix}$			
Full Name of Contributor			Registration Number, if	PAC		
Eugene L Hollins Street Address	Employer/Occi	upation/Labor Organization	<u> </u>	Form (Cash, Check, etc.)		
96 A Executive Court	Employeness			Check		
City Westerville	Staje OH	Zip Code 43081	M D N	.Amount \$200.00		
Full Name of Contributor	011		Registration Number, if	PAC		
Bradley Sinnott - Committee for Jir	n Hughes					
Street Address	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.) Check		
52 E Gay Street	State	Zip Code	M D Y	Amount		
City Columbus	OH	43215	1 0 2 4 1 6			
Full Name of Contributor  Martin Savko	Registration Number, if	Registration Number, if PAC				
Street Address	Employ er, Occ	upation/Labor Organization		Form (Cash, Check, etc.)		
675 Lindsey Marie Ln	,			Check		
City Columbus	Staire OH	Zip Code 43235	1 0 2 5 1 8	Amount \$1,000.00		
Full Name of Contributor			Registration Number, i	PAC		
Ringle for Engineer				Form (Cash, Check, etc.)		
Street Address 865 Macon Alley	Employer/Occ	upation/Labor Organization		Check		
City Columbus	Stație OH	Zip Code 43206	1 0 2 5 1	Amount \$2,000.00		
Full Name of Contributor	· <u>·</u>	1	Registration Number, i	f PAC		
George A Skestos	Eurolau en Oca	unational abor Organization		Form (Cash, Check, etc.)		
treet Address Employer, Occupation Labor Organization 31 S Columbia Avenue				Check		
City Bexley	State OH	Zip Code 43209	1 0 2 6 1	Amount 6 \$1,500.00		

Page Total \$6,250.00

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)]