

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Gergley for Gahanna									
Full Name of Contributor Anne Flaherty						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal		
City Gahanna	State o h	Zip Code 43230	M 0	D 2	Y 2	Y 0	Y 1	Y 5	Amount 50.00
Full Name of Contributor Iona Hamilton						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal		
City	State o h	Zip Code	M	D	Y	Y	Y	Y	Amount 5.00
Full Name of Contributor Adam Luck						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal		
City Gahanna	State o h	Zip Code 43230	M 0	D 2	Y 2	Y 4	Y 1	Y 5	Amount 50.00
Full Name of Contributor Sam Gergley						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) paypal		
City	State o h	Zip Code	M 0	D 3	Y 1	Y 6	Y 1	Y 5	Amount 100.00
Full Name of Contributor Joseph Weiler						Registration Number, if PAC			
Street Address 435 W 23rd St. Apt. 4D			Employer/Occupation/Labor Organization* Investor				Form (Cash, Check, etc.) Paypal		
City New York	State N Y	Zip Code 10011	M 0	D 4	Y 0	Y 4	Y 1	Y 5	Amount 250.00
Full Name of Contributor Rick Duff						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal		
City Gahanna	State O H	Zip Code 43230	M 0	D 4	Y 1	Y 1	Y 1	Y 5	Amount 50.00
Full Name of Contributor Tom Lefchik						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal		
City Gahanna	State o h	Zip Code 43230	M 0	D 4	Y 1	Y 8	Y 1	Y 5	Amount 100.00
Full Name of Contributor Cassandra Cox						Registration Number, if PAC			
Street Address 638 Gahanna Highlands Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal		
City Gahanna	State o h	Zip Code 43230	M 0	D 4	Y 1	Y 9	Y 1	Y 5	Amount 50.00

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 655.00