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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full	-									
LEVYFACTS.COM										
Full Name of Contributor						Registration Number, if PAC				
Elizabeth Gerbec										
Street Address	Employer/Occup				Form (Cash, Ch	eck, etc.)				
126 Steffan Ct.	Ì					Cr <u>e</u> dit				
City	State	Zip Code	M	D	Y	Amount				
Westerville	0 H	43081	0 2	1 5	1 2	<u>-</u>	25.00			
Full Name of Contributor			Registratio	n Numb	er, if PA	C				
Mary Medors										
Street Address	Employer/Occup				Form (Cash, Ch	eck, etc.)				
761 Andrew Ave.	\				Check	II.				
City	State	Zip Code	М	D	Y	Amount				
Westerville	O H	43081		1 5	1 2		200.00			
Full Name of Contributor			Registratio	n Numb	er, if PA	С				
Ellery Block										
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
596 Bay Dr						Credit				
City	State	Zip Code	М	D	Y	Amount				
Westerville	O H	43082	0 2	$1 \mid 6$	1 2		99.00			
Full Name of Contributor	•		Registratio	n Nunt	oer, if PA	C				
Russell Tipton										
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Ch	eck, etc.)			
126 Ormsbee Ave.					Credit					
City	State	Zip Code	М	D	Υ	Amount				
Westerville	O H	43081	0 2	1 6	1 2		100.00			
Full Name of Contributor	<u> </u>		Registratio	ın Numl	oer, if PA	.C				
Roy Twidt										
Street Address	Employer/Occu				Form (Cash, Check, etc.)					
6572 Varick Ln						Credit				
City	State	Zip Code	М	D	Y	Amount				
Westerville	O H	43082	0 2	1 8	1 2		50.00			
Full Name of Contributor	<u> </u>	•	Registratio	on Numl	ber, if PA	C				
Michael Howard										
Street Address	Employer/Occu				Form (Cash, Ch	eck, etc.)				
656 Colony Dr						Credit				
City	State	Zip Code	М	D	Y	Amount				
Westerville	O H	43081	012	$1 \mid 8 \mid$	1 2	ነ	325.00			
Full Name of Contributor	<u> </u>	•	Registratio							
Marcia Trout										
Street Address	Employer/Occu				Form (Cash, Ch	eck, etc.)				
197 Mainsail Dr.					Credit					
City	State	Zip Code	М	D	Y	Amount				
Westerville	O H	43081	[0[2]	$1 \mid 8 \mid$	1 2		5.00			
Full Name of Contributor	<u> </u>	•	Registratio	on Numl	ber, if PA	\C				
Ralph Hoffman										
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Ch	ieck, etc.)			
5665 Vanatta Rd					Check					
City	State	Zip Code	М	D	Y	Amount				
Centerburg	0 H	43011	012	1 8	1 2		100.00			
						F.3				

Page Total \$ 904.00

^{*} 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)]