

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Mayor for Council							
Full Name of Contributor Jon Craft						Registration Number, if PAC	
Street Address 6176 Pillard Place Dr			Employer/Occupation/Labor Organization* Simpson Manufacturing			Form (Cash, Check, etc.) Cash	
City Hilliard	State OH	Zip Code 43026	M 03	D 03	Y 11	Amount 40	
Full Name of Contributor John Canaw						Registration Number, if PAC	
Street Address 5096 Breckenhurst Rg			Employer/Occupation/Labor Organization* Franklin City Shopff			Form (Cash, Check, etc.) Cash	
City Hilliard	State OH	Zip Code 43026	M 03	D 03	Y 11	Amount 40	
Full Name of Contributor Erik Ward						Registration Number, if PAC	
Street Address 5233 Goldfield Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Hilliard	State OH	Zip Code 43026	M 03	D 03	Y 11	Amount 30	
Full Name of Contributor Gayle Lamb						Registration Number, if PAC	
Street Address 18515 Main St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Strongsville	State OH	Zip Code 44149	M 03	D 04	Y 11	Amount 100	
Full Name of Contributor Mitzy Hines						Registration Number, if PAC	
Street Address 5715 N. Hamilton Rd			Employer/Occupation/Labor Organization* Owner - Hines Little Smiles, LLC			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43230	M 03	D 08	Y 11	Amount 150	
Full Name of Contributor Michael Silberstein						Registration Number, if PAC	
Street Address 1093 Fountain Lane Rd, Apt D			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43213	M 02	D 23	Y 11	Amount 50	
Full Name of Contributor Dean Adamantidis						Registration Number, if PAC	
Street Address 2320 Kensington Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43221	M 03	D 10	Y 11	Amount 100	
Full Name of Contributor James Sicaras						Registration Number, if PAC	
Street Address 1955 Upper Chelsea Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43221	M 03	D 10	Y 11	Amount 100	

* 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)]