## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full				
Berry For Grove City				
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·		Registration Number	if DAC
Richard Davis			registration number,	II PAC
Street Address	Employer/Occ	unation/Labor Ozganiza	ation*	Free (Cook Chail and)
2597 Vi-Lilly Cir E		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)
City	Retired State Zip Code		Tulstv	check
Grove City	O h	1	M D Y	* *
Full Name of Contributor	TO II	43123	0 9 0 6 1	
Mark W. Altier			Registration Number,	If PAC
Street Address	Fmployer/Occa	upation/Labor Organiza	tion*	Transition of the second
420 Plum St.		Miami County		Form (Cash, Check, etc.)
City	State	Zip Code	MDY	check
Trov	o h	45373		Amount
Full Name of Contributor	0 11	45575	0 9 0 8 1 Registration Number.	1 200.00
Rutherford for Ward 3 Council (	Ommittaa		negistration number,	II PAC
Street Address		(nation/Labor Organiza)	tion*	Ir (Gt-GL L)
1933 Iris Court	Employer/Occupation/Labor Organization*		CIOTI	Form (Cash, Check, etc.)
City	Retired State	Zip Code	TM D TY	checck
Grove City	o h	43123	1 1 - 1 '	Amount
Full Name of Contributor	[ 0 : 11	1 43123	0 9 2 5 1 Registration Number,	
Ron Bartley			registration number,	TPAC
Street Address	Employer/Occur	nation/Labor Organizat	ion*	Com (Cost Charles)
2023 Bellflow Ct.	Employer/Occupation/Labor Organization* Retired		.KOH	Form (Cash, Check, etc.)
City		State Zip Code		check
Grove City	o h	43123	M D Y	Amount
Full Name of Contributor	<u> </u>	1 43123	1 0 0 3 1	
Dr. Michael Adaments			Registration Number, i	PAC
Street Address	Employer/Occur	pation/Labor Organizati	ion*	F (0 1 01 1 1 3
1921 Creeks Crossing Ct.	1	Chriopractor		Form (Cash, Check, etc.)
City	State	Zip Code	MDY	check
Grove City	O h	43123		Amount
ull Name of Contributor	<u> </u>	43123	0 9 3 0 1 1 Registration Number, if	
Brenda Hellard			kegistration number, ii	PAC
Street Address	Employer/Occur	pation/Labor Organizati	on*	Form (Cash, Check, etc.)
3151 Orders Road	' '	Retired		1
Sity Sitters Roll	State	Zip Code	TM D TY	check
Grove City	O i H	43123	1 1 1 1	Amount
ull Name of Contributor	10:11	43123	0 9 2 9 1 1	
Joseph Wise			Registration Number, if	PAC
treet Address	Employer/Occup	ation/Lahor Organization	20*	S (0t-0)
1346 Red Bank Dr.		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.)
ity		Zip Code	MDY	check
Grove City	O h	43123	1 1 - 1 '	Amount
ill Name of Contributor	(7 : 11	40120	0 9 2 8 1 1 Registration Number, if	300.00
Warrn Gard			Registration Number, it	PAC
reet Address	Fmnlover/Occup	stion/Labor Organizatio		Tour (Carlo Ci.
1658 Cayuga Court	1 ' '	<b>1</b> ' ' '		Form (Cash, Check, etc.)
ty		Signarama State Zip Code		check
Grove City	O h		M D Y	Amount
tired for contributions from individuals gives \$100 as a	[ 0   11	43123	1 0 0 1 1 1	500.00

\* 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 \$ 1,750.00