

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Berry For Grove City									
Full Name of Contributor Richard Davis						Registration Number, if PAC			
Street Address 2597 Vi-Lilly Cir E			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) check		
City Grove City		State O h		Zip Code 43123		M 0	D 9	Y 0611	Amount 100.00
Full Name of Contributor Mark W. Altier						Registration Number, if PAC			
Street Address 420 Plum St.			Employer/Occupation/Labor Organization* Miami County				Form (Cash, Check, etc.) check		
City Troy		State o h		Zip Code 45373		M 0	D 9	Y 0811	Amount 200.00
Full Name of Contributor Rutherford for Ward 3 Council Committee						Registration Number, if PAC			
Street Address 1933 Iris Court			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) check		
City Grove City		State o h		Zip Code 43123		M 0	D 9	Y 2511	Amount 300.00
Full Name of Contributor Ron Bartley						Registration Number, if PAC			
Street Address 2023 Bellflow Ct.			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) check		
City Grove City		State o h		Zip Code 43123		M 1	D 0	Y 0311	Amount 50.00
Full Name of Contributor Dr. Michael Adamants						Registration Number, if PAC			
Street Address 1921 Creeks Crossing Ct.			Employer/Occupation/Labor Organization* Chiropractor				Form (Cash, Check, etc.) check		
City Grove City		State O h		Zip Code 43123		M 0	D 9	Y 3011	Amount 250.00
Full Name of Contributor Brenda Hellard						Registration Number, if PAC			
Street Address 3151 Orders Road			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) check		
City Grove City		State O H		Zip Code 43123		M 0	D 9	Y 2911	Amount 50.00
Full Name of Contributor Joseph Wise						Registration Number, if PAC			
Street Address 1346 Red Bank Dr.			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) check		
City Grove City		State O h		Zip Code 43123		M 0	D 9	Y 2811	Amount 300.00
Full Name of Contributor Warrn Gard						Registration Number, if PAC			
Street Address 1658 Cayuga Court			Employer/Occupation/Labor Organization* Signarama				Form (Cash, Check, etc.) check		
City Grove City		State O h		Zip Code 43123		M 1	D 0	Y 0111	Amount 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