

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>KEEP HILLIARD BEAUTIFUL</b>												
Full Name of Contributor <b>ELLIOT GENO</b>						Registration Number, if PAC						
Street Address <b>4816 DAVIDSON RUN DRIVE</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>ELECTRONIC</b>					
City <b>HILLIARD</b>		State <b>OH</b>		Zip Code <b>43026</b>		M <b>0</b>		D <b>2</b>		Y <b>0817</b>		Amount <b>\$27.00</b>
Full Name of Contributor <b>DENNIS IMLER</b>						Registration Number, if PAC						
Street Address <b>4618 FAMILY DR.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>ELECTRONIC</b>					
City <b>HILLIARD</b>		State <b>OH</b>		Zip Code <b>43026</b>		M <b>0</b>		D <b>3</b>		Y <b>0217</b>		Amount <b>\$50.00</b>
Full Name of Contributor <b>ANDREW BYERLY</b>						Registration Number, if PAC						
Street Address <b>4735 CLUB PARK DR.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>ELECTRONIC</b>					
City <b>HILLIARD</b>		State <b>OH</b>		Zip Code <b>43026</b>		M <b>0</b>		D <b>3</b>		Y <b>0817</b>		Amount <b>\$50.00</b>
Full Name of Contributor <b>PAIGE RYAN</b>						Registration Number, if PAC						
Street Address <b>3418 ST. CHARLES LANE</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>ELECTRONIC</b>					
City <b>HILLIARD</b>		State <b>OH</b>		Zip Code <b>43026</b>		M <b>0</b>		D <b>3</b>		Y <b>2217</b>		Amount <b>\$100.00</b>
Full Name of Contributor <b>WILLIAM R. SCHNUG</b>						Registration Number, if PAC						
Street Address <b>4511 HAVERFIELD CT.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>					
City <b>HILLIARD</b>		State <b>OH</b>		Zip Code <b>43026</b>		M <b>0</b>		D <b>3</b>		Y <b>1317</b>		Amount <b>\$100.00</b>
Full Name of Contributor <b>MIRANDA GAGE SANDS</b>						Registration Number, if PAC						
Street Address <b>4639 MOSSROCK DR.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>					
City <b>HILLIARD</b>		State <b>OH</b>		Zip Code <b>43026</b>		M <b>0</b>		D <b>3</b>		Y <b>1317</b>		Amount <b>\$50.00</b>
Full Name of Contributor						Registration Number, if PAC						
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)					
City		State <b>OH</b>		Zip Code		M		D		Y		Amount
Full Name of Contributor						Registration Number, if PAC						
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)					
City		State <b>OH</b>		Zip Code		M		D		Y		Amount

\* 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)]