

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Spalding									
Full Name of Contributor David Gormley							Registration Number, if PAC		
Street Address 3926 Sandstone Cir				Employer/Occupation/Labor Organization* Judge, Delaware County				Form (Cash, Check, etc.) Check	
City Powell		State OH		Zip Code 43065		M 0		D 9	
						Y 2		Amount \$50.00	
Full Name of Contributor Ronn Kolbash							Registration Number, if PAC		
Street Address 6180 Brenthurst Dr				Employer/Occupation/Labor Organization* State of Ohio				Form (Cash, Check, etc.) check	
City Columbus		State OH		Zip Code 43230		M 1		D 0	
						Y 0		Amount \$100.00	
Full Name of Contributor Lauren Spalding							Registration Number, if PAC		
Street Address 1940 Glenford Court				Employer/Occupation/Labor Organization* Banker, Huntington Banc				Form (Cash, Check, etc.) check	
City Reynoldsburg		State OH		Zip Code 43089		M 1		D 0	
						Y 0		Amount \$200.00	
Full Name of Contributor M. Chance Spalding							Registration Number, if PAC		
Street Address 1960 Opal St				Employer/Occupation/Labor Organization* Student				Form (Cash, Check, etc.) check	
City Reynoldsburg		State OH		Zip Code 43089		M 1		D 0	
						Y 0		Amount \$100.00	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		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 OH		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 OH		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 OH		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)]

Page Total **\$450.00**