

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Sandy Long									
Full Name of Contributor Sandy Long						Registration Number, if PAC			
Street Address 1675 Haft Drive			Employer/Occupation/Labor Organization* Evaluations, Inc.				Form (Cash, Check, etc.) Check		
City Reynoldsburg		State O	H	Zip Code 43068		M 0	D 9	Y 0	Amount 300.00
Full Name of Contributor Reynoldsburg Republican Club						Registration Number, if PAC			
Street Address 8135 Reynoldswood Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City Reynoldsburg		State O	H	Zip Code 43068		M 1	D 0	Y 0	Amount 1,000.00
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State		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		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		Zip Code		M	D	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
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City		State		Zip Code		M	D	Y	Amount
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City		State		Zip Code		M	D	Y	Amount
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City		State		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		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 appear. [R.C. 3517.10(B)(4)]