

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Shane Ewald</b>													
Full Name of Contributor <b>Wilma Humphrey</b>						Registration Number, if PAC							
Street Address <b>65 Nob Hill Ct.</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>						
City <b>Gahanna</b>		State <b>O   H</b>		Zip Code <b>43230</b>		M <b>0   8</b>		D <b>1   3</b>		Y <b>1   1</b>		Amount <b>100.00</b>	
Full Name of Contributor <b>Dianna Brewer</b>						Registration Number, if PAC							
Street Address <b>230 Brookhill Drive</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>						
City <b>Gahanna</b>		State <b>O   H</b>		Zip Code <b>43230</b>		M <b>0   8</b>		D <b>3   0</b>		Y <b>1   1</b>		Amount <b>50.00</b>	
Full Name of Contributor <b>Kirk McVay</b>						Registration Number, if PAC							
Street Address <b>755 S. High Street</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>						
City <b>Columbus</b>		State <b>O   H</b>		Zip Code <b>43206</b>		M <b>0   9</b>		D <b>0   2</b>		Y <b>1   1</b>		Amount <b>100.00</b>	
Full Name of Contributor <b>Eric Miller</b>						Registration Number, if PAC							
Street Address <b>588 Wickham Way</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Credit Card</b>						
City <b>Gahanna</b>		State <b>O   H</b>		Zip Code <b>43230</b>		M <b>0   9</b>		D <b>0   7</b>		Y <b>1   1</b>		Amount <b>25.00</b>	
Full Name of Contributor <b>R. William Meeks</b>						Registration Number, if PAC							
Street Address <b>511 South High Street</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>						
City <b>Columbus</b>		State <b>O   H</b>		Zip Code <b>43215</b>		M <b>0   9</b>		D <b>1   2</b>		Y <b>1   1</b>		Amount <b>150.00</b>	
Full Name of Contributor <b>David Thomas</b>						Registration Number, if PAC							
Street Address <b>511 South High Street</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>						
City <b>Columbus</b>		State <b>O   H</b>		Zip Code <b>43215</b>		M <b>0   9</b>		D <b>1   2</b>		Y <b>1   1</b>		Amount <b>100.00</b>	
Full Name of Contributor <b>Lisa Tome</b>						Registration Number, if PAC							
Street Address <b>852 Pleasant Ridge Avenue</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>						
City <b>Bexley</b>		State <b>O   H</b>		Zip Code <b>43209</b>		M <b>0   9</b>		D <b>1   2</b>		Y <b>1   1</b>		Amount <b>25.00</b>	
Full Name of Contributor <b>Donald Kenney</b>						Registration Number, if PAC							
Street Address <b>470 Olde Worthington Road, Suite 100</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Credit Card</b>						
City <b>Westerville</b>		State <b>O   H</b>		Zip Code <b>43082</b>		M <b>0   9</b>		D <b>1   4</b>		Y <b>1   1</b>		Amount <b>100.00</b>	

\* 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 \$ 650.00