Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Jefferson Township Levy Committee				
Full Name of Contributor Steven A Miller			Registration Number, if PAC	
Street Address 6444 Darling Rd	Employer/Occup	oation/Labor Organization*		Form (Cash, Check, etc.) Check
City Blacklick	State OH	Zip Code 43004	0 4 0 8 1 0	Amount \$100.00
Full Name of Contributor William R Heifner			Registration Number, if PAC	
Street Address 3215 Rocky Fork Pl	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	0 4 1 3 1 0	Amount \$100.00
full Name of Contributor Kathleen A Weber			Registration Number, if PAC	
Street Address 1602 Foxhall Rd	Employer/Occup	oation/Labor Organization*	- The second	Form (Cash, Check, etc.) Check
City Blacklick	State OH	Zip Code 43004	0 4 1 4 1 0	Amount \$500.00
Full Name of Contributor Janis R Bowling			Registration Number, if	PAC
Street Address 700 N Waggoner Rd	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Blacklick	State OH	Zip Code 43004	0 4 1 4 1 0	Amount \$50.00
Full Name of Contributor HUB Plastics, Inc			Registration Number, if	PAC
Street Address 725 Reynoldsburg-New Albany Rd	Employer/Occuj	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Blacklick	State OH	Zip Code 43004	0 4 1 6 1 0	Amount \$250.00
Full Name of Contributor John B Albers II	Registration Number, if	PAC		
Street Address 88 N Fifth St	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	0 4 1 9 1 0	
ull Name of Contributor Donna W Glenn			Registration Number, if PAC	
Street Address 6099 Headly Rd	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	0 4 1 9 1 0	Amount \$100.00
Full Name of Contributor Rain One, Inc			Registration Number, if	
Street Address 6871 Taylor Rd	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Blacklick	State OH	Zip Code 43004	M D Y O 4 1 9 1 0	Amount) \$250.00

Page Total \$1,450.00

^{*} 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 also appear. [R.C. 3517.10(B)(4)]