

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|                                                                  |  |                       |                                         |  |                   |                             |                                          |                         |  |
|------------------------------------------------------------------|--|-----------------------|-----------------------------------------|--|-------------------|-----------------------------|------------------------------------------|-------------------------|--|
| Name of Committee in Full<br><b>Rover For UA Schools</b>         |  |                       |                                         |  |                   |                             |                                          |                         |  |
| Full Name of Contributor<br><b>Park Zimpher</b>                  |  |                       |                                         |  |                   | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>2435 Coventry Road</b>                      |  |                       | Employer/Occupation/Labor Organization* |  |                   |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Upper Arlington</b>                                   |  | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                |  | M<br><b>0   7</b> | D<br><b>2   8</b>           | Y<br><b>1   5</b>                        | Amount<br><b>100.00</b> |  |
| Full Name of Contributor<br><b>Bert &amp; Katy Kram</b>          |  |                       |                                         |  |                   | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>4216 Fairfax Dr</b>                         |  |                       | Employer/Occupation/Labor Organization* |  |                   |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Upper Arlington</b>                                   |  | State<br><b>O   H</b> | Zip Code<br><b>43220</b>                |  | M<br><b>0   7</b> | D<br><b>2   8</b>           | Y<br><b>1   5</b>                        | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Jim Hendrix</b>                   |  |                       |                                         |  |                   | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>2511 Abington Rd</b>                        |  |                       | Employer/Occupation/Labor Organization* |  |                   |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Upper Arlington</b>                                   |  | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                |  | M<br><b>0   7</b> | D<br><b>3   1</b>           | Y<br><b>1   5</b>                        | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Sam &amp; Kathy Armore</b>        |  |                       |                                         |  |                   | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>4565 Lanercost Way</b>                      |  |                       | Employer/Occupation/Labor Organization* |  |                   |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Upper Arlington</b>                                   |  | State<br><b>O   H</b> | Zip Code<br><b>43220</b>                |  | M<br><b>0   8</b> | D<br><b>0   5</b>           | Y<br><b>1   5</b>                        | Amount<br><b>35.00</b>  |  |
| Full Name of Contributor<br><b>Donna Willmarth</b>               |  |                       |                                         |  |                   | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>2009 Keswick Dr</b>                         |  |                       | Employer/Occupation/Labor Organization* |  |                   |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                          |  | State<br><b>O   H</b> | Zip Code<br><b>43220</b>                |  | M<br><b>0   7</b> | D<br><b>3   1</b>           | Y<br><b>1   5</b>                        | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Frank &amp; Jana Tice</b>         |  |                       |                                         |  |                   | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>2580 Onadaga Dr</b>                         |  |                       | Employer/Occupation/Labor Organization* |  |                   |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Upper Arlington</b>                                   |  | State<br><b>O   H</b> | Zip Code<br><b>43220</b>                |  | M<br><b>0   8</b> | D<br><b>0   4</b>           | Y<br><b>1   5</b>                        | Amount<br><b>200.00</b> |  |
| Full Name of Contributor<br><b>Patrick &amp; Kristine Devine</b> |  |                       |                                         |  |                   | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>4305 Kioka Ave</b>                          |  |                       | Employer/Occupation/Labor Organization* |  |                   |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Upper Arlington</b>                                   |  | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                |  | M<br><b>0   8</b> | D<br><b>1   2</b>           | Y<br><b>1   5</b>                        | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Collin &amp; Elizabeth Seely</b>  |  |                       |                                         |  |                   | Registration Number, if PAC |                                          |                         |  |
| Street Address<br><b>4540 Heston Ct</b>                          |  |                       | Employer/Occupation/Labor Organization* |  |                   |                             | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                          |  | State<br><b>O   H</b> | Zip Code<br><b>43220</b>                |  | M<br><b>0   8</b> | D<br><b>0   9</b>           | Y<br><b>1   5</b>                        | Amount<br><b>75.00</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 \$ **610.00**