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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Walter4Dublin Full Name of Contributor		<del> </del>	6 .			
			Registr	ation Nun	iber, if PA	VC.
Lekha Shah	<u> </u>					
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
6268 Bellow Valley		T		<del></del>	·	Credit Card
City	State	Zîp Code	M	D	Y	Amount
Dublin	O   H	43016	0 7			250.00
Full Name of Contributor			Registr	ation Nur	ber, if PA	VC.
Dominique A Brunet		<del></del>	<u> </u>			<u> </u>
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
6816 Enfield Trace	<u> </u>					Credit Card
City	State	Zip Code	М	D	Y	Amount
Dublin	OIH	43017	0 7	216	1 5	25.00
Full Name of Contributor		<u> </u>	Registra	ation Num	ber, if PA	vC .
John Hardt						
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
7070 Gorden Farms Pkwy						Creidt Card
City	State	Zip Code	М	D	Y	Amount
Dublin	OIH	43017	017	216	115	250.00
Full Name of Contributor			Registra	tion Num		
Nancy R Gernstetter						
Street Address	Employer/Occup	ation/Labor Organization*			_	Form (Cash, Check, etc.)
4689 Donegal Cliffs Dr						Credit Card
City	State	Zip Code	М	D	Y	Amount
Dublin	OIH	43017	017	217	115	50.00
Full Name of Contributor				tion Num		
Kelly Ackert						
Street Address	Employer/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
8597 Finlarig Drive	1					Credit Card
City	State	Zip Code	М	ā	ΙΥ	Amount
Dublin	OIH	43017	017	217	1   5	50.00
Full Name of Contributor				tion Numb		
Betty Blumenauer						
Street Address	Employer/Occupa	ntion/Labor Organization*	<u>-</u>		_	Form (Cash, Check, etc.)
6004 Kirkwall Ct.						Check
City	State	Zip Code	М	D	Y	Amount
Dublin	OIH	43017		217		
Full Name of Contributor				tion Num		
Tim Spencer						•
Street Address	Employer/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
8094 Holyrood Court	' '					Credit Card
City	State	Zip Code	М	Ď	Y	Amount
Dublin	OIH	43017	I .	2 9	1 5	
Full Name of Contributor		45017		tion Numb		75.00
John Wirchanski			eista	LIMPT 17CHILL	⊶, u FA	•
Street Address	Employer/Occurs	tion/Labor Organization*				Form (Cash, Check, etc.)
160 Franklin Street						
City	State	Zip Code	М	D	Y	Credit Card
Dublin	OIH	43017	1 .			Amount 2=0.00
coursed for contributions from individuals over \$100 to statewide and owner			07	2 9	1 5	250.00

\* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$	970.00
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