

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|   |  |                       |   |                          |  |                             |   |                   |  |                   |  |                           |  |
|---|--|-----------------------|---|--------------------------|--|-----------------------------|---|-------------------|--|-------------------|--|---------------------------|--|
| Name of Committee in Full<br><b>The Committee For A Better Clinton Township</b> |  |                       |   |                          |  |                             |   |                   |  |                   |  |                           |  |
| Full Name of Contributor<br><b>University View Civic Association</b>            |  |                       |   |                          |  | Registration Number, if PAC |   |                   |  |                   |  |                           |  |
| Street Address<br><b>1710 Hess Blvd</b>   |  |                       | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>ck# 2168</b>     |                   |  |                   |  |                           |  |
| City<br><b>Columbus</b>   |  | State<br><b>O   H</b> |   | Zip Code<br><b>43212</b> |  | M<br><b>0   9</b>           |   | D<br><b>2   0</b> |  | Y<br><b>16  </b>  |  | Amount<br><b>500.00</b>   |  |
| Full Name of Contributor<br><b>Brad Theodor</b>                                 |  |                       |   |                          |  | Registration Number, if PAC |   |                   |  |                   |  |                           |  |
| Street Address<br><b>1824 Audrey Rd</b>   |  |                       | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>cash</b>         |                   |  |                   |  |                           |  |
| City<br><b>Columbus</b>   |  | State<br><b>O   H</b> |   | Zip Code<br><b>43224</b> |  | M<br><b>0   9</b>           |   | D<br><b>2   1</b> |  | Y<br><b>1   6</b> |  | Amount<br><b>100.00</b>   |  |
| Full Name of Contributor<br><b>FOP Politicital Education Fund</b>               |  |                       |   |                          |  | Registration Number, if PAC |   |                   |  |                   |  |                           |  |
| Street Address<br><b>6800 Schrock Hill CT.</b>                                  |  |                       | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>ck# 1602</b>     |                   |  |                   |  |                           |  |
| City<br><b>Columbus</b>   |  | State<br><b>O   H</b> |   | Zip Code<br><b>43229</b> |  | M<br><b>0   9</b>           |   | D<br><b>2   6</b> |  | Y<br><b>1   6</b> |  | Amount<br><b>1,000.00</b> |  |
| Full Name of Contributor<br><b>Brad Theodor</b>                                 |  |                       |   |                          |  | Registration Number, if PAC |   |                   |  |                   |  |                           |  |
| Street Address<br><b>1824 Audrey Rd</b>   |  |                       | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>cash</b>         |                   |  |                   |  |                           |  |
| City<br><b>Columbus</b>   |  | State<br><b>O   H</b> |   | Zip Code<br><b>43224</b> |  | M<br><b>0   9</b>           |   | D<br><b>2   6</b> |  | Y<br><b>1   6</b> |  | Amount<br><b>100.00</b>   |  |
| Full Name of Contributor<br><b>Abpullam Ismail</b>                              |  |                       |   |                          |  | Registration Number, if PAC |   |                   |  |                   |  |                           |  |
| Street Address<br><b>3027 Kenlawn St.</b>                                       |  |                       | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>cash</b>         |                   |  |                   |  |                           |  |
| City<br><b>Columbus</b>   |  | State<br><b>O   H</b> |   | Zip Code<br><b>43224</b> |  | M<br><b>1   0</b>           |   | D<br><b>0   3</b> |  | Y<br><b>1   6</b> |  | Amount<br><b>100.00</b>   |  |
| Full Name of Contributor<br><b>Joseph M. Wing</b>                               |  |                       |   |                          |  | Registration Number, if PAC |   |                   |  |                   |  |                           |  |
| Street Address<br><b>3863 Walford St</b>  |  |                       | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>ck# 2817</b>     |                   |  |                   |  |                           |  |
| City<br><b>Columbus</b>   |  | State<br><b>O   H</b> |   | Zip Code<br><b>43224</b> |  | M<br><b>1   0</b>           |   | D<br><b>0   3</b> |  | Y<br><b>1   6</b> |  | Amount<br><b>100.00</b>   |  |
| Full Name of Contributor<br><b>Jane Cera</b>                                    |  |                       |   |                          |  | Registration Number, if PAC |   |                   |  |                   |  |                           |  |
| Street Address<br><b>1210 E. Cooke Rd</b>                                       |  |                       | Employer/Occupation/Labor Organization* |                          |  |                             | Form (Cash, Check, etc.)<br><b>mo# 27101984</b> |                   |  |                   |  |                           |  |
| City<br><b>Columbus</b>   |  | State<br><b>O   h</b> |   | Zip Code<br><b>43224</b> |  | M<br><b>1   0</b>           |   | D<br><b>1   1</b> |  | Y<br><b>1   6</b> |  | Amount<br><b>100.00</b>   |  |
| 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)]