

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full							
Full Name of Contributor Cheree Kirven						Registration Number, if PAC	
Street Address 5631 Lynx Dr			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) ck	
City Westerville			State OH	Zip Code 43081	M 1	D 0	Y 615
						Amount 5 ⁰⁰	
Full Name of Contributor Maxine Greenler						Registration Number, if PAC	
Street Address 4617 Collingville Way			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) ck	
City Columbus			State OH	Zip Code 43230	M 1	D 0	Y 1215
						Amount 100 ⁰⁰	
Full Name of Contributor Jonathan Denny						Registration Number, if PAC	
Street Address 4387 Pantonybury St.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash	
City New Albany			State OH	Zip Code 43054	M 1	D 0	Y 1215
						Amount 100 ⁰⁰	
Full Name of Contributor Jeanette Aslanian						Registration Number, if PAC	
Street Address 6388 L. Albany Bridge			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) ck	
City Columbus			State OH	Zip Code 43230	M 1	D 0	Y 1315
						Amount 10 ⁰⁰	
Full Name of Contributor Jeff Bennett						Registration Number, if PAC	
Street Address 14860 E. St. Rt. 37			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash	
City Sunbury			State OH	Zip Code 43074	M 1	D 0	Y 1315
						Amount 10 ⁰⁰	
Full Name of Contributor Tim Bush						Registration Number, if PAC	
Street Address 5430 Haussman Pl			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash	
City New Albany			State OH	Zip Code 43081	M 1	D 0	Y 1315
						Amount 5 ⁰⁰	
Full Name of Contributor Cathy Ricks						Registration Number, if PAC	
Street Address 6417 Timbermill Way			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) ck	
City Reynoldsburg			State OH	Zip Code 43065	M 1	D 0	Y 1315
						Amount 10 ⁰⁰	
Full Name of Contributor Natalie Weitz						Registration Number, if PAC	
Street Address 5038 Shannonbrook			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) ck	
City Columbus			State OH	Zip Code 43221	M 1	D 0	Y 1315
						Amount 10 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)]

Page Total \$ 250⁰⁰