## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full					
The Central Ohio Restaurant Asso	ciation Political A	ction Committee			
Full Name of Contributor Paul D. Astleford			Registration Number, if PAC		
Street Address	1			7 (2 ) **	
3429 River Seine St.	Associati	pation/Labor Organization* on Executive		Form (Cash, Check, etc.) check 4131	
City Columbus	State OH	Zip Code 43221	M D Y 0 9 2 1 1 1	Amount \$50.00	
rull Name of Contributor			Registration Number, if PAC		
James S. Merchant, Jr.					
Street Address		pation/Labor Organization		Form (Cash, Check, etc.)	
1040 Melinda Drive	Restaura	int supply		check 7540	
City	State	Zip Code	M D Y	Amount	
Westerville	ОН	43081	0 9 2 2 1 1	\$125.00	
Full Name of Contributor Scott L. Heimlich			Registration Number, if PAC		
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)	
1474 Linwood Ave.	Restaura	nt owner	check 1048		
City Columbus	State OH	Zip Code 43206	1 0 0 4 1	Amount \$125.00	
Full Name of Contributor	<del></del>	:	Registration Number, if	PAC	
Robert J. Kramer		•			
Street Address	Employer/Occu	pation/Labor Organization	<del></del>	Form (Cash, Check, etc.)	
196 W. Riverglen Drive	Restaura			check 5676	
City Worthington	State OH	Zip Code 43085	M D Y	Amount \$125.00	
Full Name of Contributor			Registration Number, if		
Elspeth Paige-Sack		•			
Street Address	Employer/Occu	pation/Labor Organization	<del>. •</del>	Form (Cash, Check, etc.)	
2632 E. Livingston Ave	Restauran	Restaurant owner		check 1270	
City	State	Zip Code	M D Y	Amount	
Columbus	OH <sub></sub>	43209	1 0 0 6 1 1	\$125.00	
Full Name of Contributor  Dave B. Gross  Registration Number, if PAC					
Street Address		<u> </u>			
2266 Lane Ave.		pation/Labor Organization	····	Form (Cash, Check, etc.)	
	Restauran			check 8306	
City Columbus	State OH	Zip Code 43221	M D Y	Amount \$250.00	
Full Name of Contributor		<u>i</u>		<u> </u>	
Thomas R. Gross			Registration Number, if I	AC	
Street Address	Employer/Occur	pation/Labor Organization*		Form (Cash, Check, etc.)	
2700 Crafton Park	1 ' '	nurant: owner		check	
City	State	Zip Code	M D Y	2576	
Upper Arlitaton	OH	43221	1 0 1 8 1 1	\$250.0	
Full Name of Contributor  Registration Number, if PAC					
Street Address	Employed(C)	pation/Labor Organization		Form (Cash Charles)	
	Employen/Occup	oanow Labor Organization		Form (Cash, Check, etc.)	
City	State	Zip Code	M. D. Y	Amount	
	OH				

<sup>\*</sup> 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)]