Page 1	

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Citizens for Quincel								
Full Name of Contributor			Registra	ition Num	ber, if PA	С		
Whitehall Credit Union			L					
Street Address	Employer/Occup	pation/Labor Organization	1*			Form (Cash, Check, e	etc.)	
5025 E. Main St.						cash		
City	State	Zip Code	М	D	Y	Amount		
Columbus	OH	43213	0 3	3 1	1 7		0.03	
Full Name of Contributor			Registra	tion Num	ber, if PA	С		
Whitehall Credit Union								
Street Address	Employer/Occup	*			Form (Cash, Check, e	etc.)		
5025 E. Main St.					;	cash		
City	State	Zip Code	M	D	Y	Amount		
Columbus	OH	43213	0 6	3 0	1 7		0.01	
Full Name of Contributor		7	Registra	ation Num	ber, if PA	С		
Street Address	Employer/Occu	pation/Labor Organization	1 *	Form (Cash, C				
						<u> </u>	_	
City	State	Zip Code	М	D	Y	Amount		
		<u> </u>						
Full Name of Contributor			Registra	Registration Number, if PAC				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
City	State	Zip Code	М	D	Y	Amount		
Full Name of Contributor			Registra	ation Nun	iber, if PA	.C		
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check,	etc.)	
Í						ì		
City	State	Zip Code	М	D	Y	Amount		
,		1		1	1			
Full Name of Contributor			Registr	ation Nun	ber, if PA	c		
j			l l					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
						:		
City	State	Zip Code	М	D	Y	Amount		
			l 1	1				
Full Name of Contributor			Registr	ation Nun	nber, if PA	iC .		
Street Address	Employer/Occu	pation/Labor Organization	n*			Form (Cash, Check,	etc.)	
City	State	Zip Code	М	D	Y	Amount		
Full Name of Contributor			Registr	ation Nur	nber, if P	AC		
•			ł					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check,	etc.)		
j						<u>L</u>		
City	State	Zip Code	М	D	Y	Amount		
1								
	The state of the state of	didata. If a medibates in o	alf amployed the	occupe**	n and the	nama of the		

* 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 \$	0.04