3]-	A	
R	C	3517	10

Page	1

Statement of Contributions Received

Prescribed by Secretary of State 3/05

		Literary of State 3/03					
Name of Committee in Full							
Walter4Dublin							
Full Name of Contributor			Registra	Registration Number, if PAC			
Robert Fathman							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.	.)
5805 Tarton Circle North						Check	
City	State	Zip Code	М	D	Y	Атоши	
Dublin	OIH	43017	0 4	0 5	1 1	100	00.0
Full Name of Contributor		1	Registra	tion Num		C	
Marc D. Smith		,					
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.	.)
6426 Red Stone Loop	Kohler &	& Smith Co., LPA	/ Atto	rnev		Acct Transfe	ין כ
City	State	Zip Code	М	D	Υ	Amount	
Dublin	OIH	43016	0 4	0 8	1 1	250	0.00
Full Name of Contributor	<u> </u>	1		tion Numi			
Kristine Westerheide		İ					
Street Address	Employer/Occup	ation/Labor Organization*	<u>L</u>			Form (Cash, Check, etc.	.)
6177 Balmoral Drive						PayPal	•
City	State	Zip Code	М	D	Y	Amount	
Dublin	O+H	43017	014	018	1 1	1	0.00
Full Name of Contributor		1		tion Numl			7.00
Tom Walter		Į			,		
Street Address	Employer/Occup	ation/Labor Organization*			,	Form (Cash, Check, etc.	1
707 Green						PayPal	7
City	State	Zip Code	Тм	D	У	Amount	
New Smyrna Beach	FL	32168		018			0.00
Full Name of Contributor		1 32100		tion Num			3.00
Scott McCort			Kegista	HOM TVENIA	001, 11 1 7 1		
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.	1
6350 Memorial Drive	Zampioyen occup	Organization				PavPal	.,
City	State	Zip Code	M	D	Y	Amount	
Dublin	OIH	43017	$0 \mid 4 \mid$	1 . !	$\begin{array}{c c} 1 \\ 1 \end{array}$		0.00
Full Name of Contributor		13017		tion Numl			J.(JC)
PayPal, Inc.			Regission	BOII MUIN	DCI, II 1 71		
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.	1
2211 North First Street	Zimpioyen occupi	Jacob Lator Organization				ACH Transf	
City	State	Zip Code	М	D	Y	Acri Iransi	.eı
San Jose	CA	95131		$\begin{bmatrix} 1 \\ 1 \end{bmatrix} 1$			0.08
Full Name of Contributor		1 93131		tion Numb			3.00
PavPal, Inc.		¥	Kegisua	iion num	UCI, II I A	·C	
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.	
2211 North First Street	Employer/Occup.	anon Labor Organization					
City	State	Zip Code	Тм	D	Υ	ACH Transf	er
San Jose	$C \mid A$	95131	1	l . :			0.02
Full Name of Contributor	1 0 11	93131	0 4		1 1		J.UZ
Full Name of Contributor Registration Number, if PAC James Korcykoski							
Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)					7		
8026 Summerhouse Drive West	Employer/Occup					J	
City	State	Zip Code	1.4			Check	
Dublin	O H		M	ו D מוב	Y ala	Amount 1 2 5	= no
Dubin		43016	0 4	1 5	1 1	1.20	5.00

* 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 \$	825.10