

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Families for Campbell									
Full Name of Contributor Matthew Campbell						Registration Number, if PAC			
Street Address 366 Imperial Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna		State OH	Zip Code 43230		M 0	D 4	Y 0	Y 8	Amount \$50.00
Full Name of Contributor Deborah Reasons						Registration Number, if PAC			
Street Address 6717 Rovilla Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Blacklick		State OH	Zip Code 43004		M 0	D 4	Y 0	Y 8	Amount \$50.00
Full Name of Contributor Harris Campbell						Registration Number, if PAC			
Street Address 1365 Bear Island Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City West Palm Beach		State FL	Zip Code 33409		M 0	D 8	Y 1	Y 5	Amount \$100.00
Full Name of Contributor Jeannie Custom Embroidery						Registration Number, if PAC			
Street Address 708 Waybaugh Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal		
City Gahanna		State OH	Zip Code 43230		M 0	D 8	Y 2	Y 2	Amount \$100.00
Full Name of Contributor Mary McCleary						Registration Number, if PAC			
Street Address 1109 Arcaro Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna		State OH	Zip Code 43230		M 0	D 8	Y 2	Y 8	Amount \$50.00
Full Name of Contributor Ann Flaherty						Registration Number, if PAC			
Street Address 546 Springwood Lake Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal		
City Gahanna		State OH	Zip Code 43230		M 0	D 9	Y 0	Y 4	Amount \$25.00
Full Name of Contributor Robert Weber						Registration Number, if PAC			
Street Address 530 Meadowsweet Place			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna		State OH	Zip Code 43230		M 0	D 9	Y 0	Y 9	Amount \$25.00
Full Name of Contributor Timothy Lenihan						Registration Number, if PAC			
Street Address 590 Uxbridge Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna		State OH	Zip Code 43230		M 0	D 9	Y 0	Y 9	Amount \$200.00

* 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 **\$600.00**