

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Sensible Citizens For David Hedrick							
Full Name of Contributor Karl Noreus						Registration Number, if PAC	
Street Address 679 Robbin Wood Avenue			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Whitehall		State OH	Zip Code 43213	M 0	D 7	Y 1	Amount \$50.00
Full Name of Contributor Susan Riedlinger						Registration Number, if PAC	
Street Address 6531 LARCH CT			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Reynoldsburg		State OH	Zip Code 43068	M 0	D 8	Y 1	Amount \$20.00
Full Name of Contributor Karl Noreus						Registration Number, if PAC	
Street Address 679 Robbin Wood Avenue			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Whitehall		State OH	Zip Code 43213	M 0	D 9	Y 1	Amount \$20.00
Full Name of Contributor Karl Noreus						Registration Number, if PAC	
Street Address 679 Robbin Wood Avenue			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Whitehall		State OH	Zip Code 43213	M 1	D 0	Y 0	Amount \$20.00
Full Name of Contributor David Thomas						Registration Number, if PAC	
Street Address 541 ELIZABETH AVE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus		State OH	Zip Code 43213	M 1	D 0	Y 1	Amount \$20.00
Full Name of Contributor David W. Hedrick						Registration Number, if PAC	
Street Address 514 Hawthorne Place			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Bank Transfer	
City Reynoldsburg		State OH	Zip Code 43068	M 0	D 7	Y 0	Amount \$200.00
Full Name of Contributor David W. Hedrick						Registration Number, if PAC	
Street Address 514 Hawthorne Place			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Bank Transfer	
City Reynoldsburg		State OH	Zip Code 43068	M 0	D 9	Y 1	Amount \$200.00
Full Name of Contributor David W. Hedrick						Registration Number, if PAC	
Street Address 514 Hawthorne Place			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Bank Transfer	
City Reynoldsburg		State OH	Zip Code 43068	M 0	D 9	Y 1	Amount \$80.00

* 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)]