Statement of Contributions Received

Prescribed by Secretary of State 3/05

V (C									
Name of Committee in Full									
Ben Kessler for Bexley City Council			<u> </u>						
Full Name of Contributor				Kegisi	tration No	mber, if PA	AC		
Robyn Jones	r								
Street Address	Employer	Occupati	ion/Labor Organization*				Form (Cash, Check,	etc.)	
825 Vernon Road							Check		
City Bexley	O I	te H	Zip Code 43209	$\begin{vmatrix} M \\ 1 \end{vmatrix}$	$\begin{bmatrix} 0 & 0 \\ 0 & 0 \end{bmatrix}$	6 1	Amount	50.00	
Full Name of Contributor			10207			mber if PA	AC .	20.00	
Dan Ferdelman				1		-			
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
2550 Bryden Road					Onlir			•	
City	Sta	te	Zip Code	М	D	ΙŸ	Amount		
Bexley	01	Н	43209		00	7 1	1	40.00	
Full Name of Contributor			20-207			mber if PA	AC	10.00	
Kevin Brady									
Street Address	Employer	Occupati	ion/Labor Organization*				Form (Cash, Check,	etc.)	
172 South Columbia Avenue					Online				
Gity	Sta	te	Zip Code	M	D	У	Amount		
Bexley	Oi	Н	43209		0 0	$7 \begin{vmatrix} 1 \end{vmatrix}$	1	50.00	
Full Name of Contributor			10207		_	moer if PA	AE	50.00	
Monique Lampke				1.0 9.50					
Street Address	Ermlover	Ocemati	ion/Labor Organization*				Form (Cash, Check,	etc.)	
2447 Plymouth Avenue	any system and a second a second and a second a second and a second a second and a second and a second and a						Check		
City City	Sta	te	Zip Code	M	D	Y	Amount		
Bexley		H	43209	1 1	0 0	$7 \begin{vmatrix} 1 \end{vmatrix}$	1	40.00	
Full Name of Contributor			40209			mber, if PA	<u> </u>	40.00	
Susan & Erick Zanner				1.040	4,000,110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.5		
Street Address	Ermlouer	Occarnati	ion II abore Organization×				Form (Cash, Check,	etc i	
316 South Roosevelt Avenue	Employer/Occupation/Labor Organization*						Check		
Giy	Sta	to	Zip Code	MI	J D	J Y	Amount		
Bexley		H	43209	1		$9 \begin{vmatrix} 1 \\ 1 \end{vmatrix}$	1 Millouik	50.00	
Full Name of Contributor	101		43209			9 1 mber, if P.A	<u></u>	30.00	
				ricyist	a anon 140	illioet, it I a	16		
Kent Johnson treet Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)									
	Embloyettoccobations ador or datasation				Online			cic.;	
145 South Remington Road	Sta		Zip Code	M	D	Y	Amount	_	
Bexley		H	43209		1 1			E0 00	
Full Name of Contributor	101	11	43209	1 Pagid	U I I	0 1 mber, if PA	<u> </u>	50.00	
Jed & Joyce Morison				regist	rt drivit tar	illioet, it I is	10		
Street Address	Francisconi	n ann sti	imal Show One swin shims X				Form (Cash, Check,	oto l	
	Employer/Occupation/Labor Organization*							etc.)	
1527 Brentwood Road	Sta	*-	Zip Code	M	D	Y	Check		
Bexley		"H	43209	1 1	0 0	1 1	1	50.00	
Full Name of Contributor	1 0 1	-	10207			mber if PA			
Mike Kessler									
Street Address	Employer	Occupati	on/Labor Organization*			-	Form (Cash, Check,	etc.)	
188 River Road	1 2,200						Check		
City	Sta	te	Zip Code	М	Di	Y	Amount		
Calais	M	E	04619		0 1	7 1	1	100.00	

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.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, it 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, it any, must appear. [R. C. 3517.10(B)(4)]