

# FOR PAPER FILING ONLY

## Statement of Contributions Received

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Prescribed by Secretary of State 03/05

|                                                                                  |  |                    |                                         |               |               |                                          |                           |
|----------------------------------------------------------------------------------|--|--------------------|-----------------------------------------|---------------|---------------|------------------------------------------|---------------------------|
| Name of Committee in Full<br><b>Re-Elect Becky Stinchcomb for Mayor Committe</b> |  |                    |                                         |               |               |                                          |                           |
| Full Name of Contributor<br><b>Mina Dioun</b>                                    |  |                    |                                         |               |               | Registration Number, if PAC              |                           |
| Street Address<br><b>6965 Clivdon Mews</b>                                       |  |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                           |
| City<br><b>New Albany</b>                                                        |  | State<br><b>OH</b> | Zip Code<br><b>43054</b>                | M<br><b>1</b> | D<br><b>0</b> | Y<br><b>2 3 0 7</b>                      | Amount<br><b>\$750.00</b> |
| Full Name of Contributor<br><b>Mo Dioun</b>                                      |  |                    |                                         |               |               | Registration Number, if PAC              |                           |
| Street Address<br><b>6965 Clivdon Mews</b>                                       |  |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                           |
| City<br><b>New Albany</b>                                                        |  | State<br><b>OH</b> | Zip Code<br><b>43053</b>                | M<br><b>1</b> | D<br><b>0</b> | Y<br><b>2 3 0 7</b>                      | Amount<br><b>\$750.00</b> |
| Full Name of Contributor<br><b>Sheila Dioun</b>                                  |  |                    |                                         |               |               | Registration Number, if PAC              |                           |
| Street Address<br><b>1208 Sanctuary Pl.</b>                                      |  |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                           |
| City<br><b>Gahanna</b>                                                           |  | State<br><b>OH</b> | Zip Code<br><b>43230</b>                | M<br><b>1</b> | D<br><b>0</b> | Y<br><b>2 3 0 7</b>                      | Amount<br><b>\$250.00</b> |
| Full Name of Contributor<br><b>Adam Trautner</b>                                 |  |                    |                                         |               |               | Registration Number, if PAC              |                           |
| Street Address<br><b>1208 Sanctuary Pl.</b>                                      |  |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                           |
| City<br><b>Gahanna</b>                                                           |  | State<br><b>OH</b> | Zip Code<br><b>43230</b>                | M<br><b>1</b> | D<br><b>0</b> | Y<br><b>2 3 0 7</b>                      | Amount<br><b>\$250.00</b> |
| Full Name of Contributor<br><b>Daniel P. Rako</b>                                |  |                    |                                         |               |               | Registration Number, if PAC              |                           |
| Street Address<br><b>5969 Dublin-Granville</b>                                   |  |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                           |
| City<br><b>Gahanna</b>                                                           |  | State<br><b>OH</b> | Zip Code<br><b>43230</b>                | M<br><b>1</b> | D<br><b>1</b> | Y<br><b>0 1 0 7</b>                      | Amount<br><b>\$25.00</b>  |
| Full Name of Contributor<br><b>Steven Van Slyck</b>                              |  |                    |                                         |               |               | Registration Number, if PAC              |                           |
| Street Address<br><b>134 Rocky Creek Dr.</b>                                     |  |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                           |
| City<br><b>Gahanna</b>                                                           |  | State<br><b>OH</b> | Zip Code<br><b>43230</b>                | M<br><b>1</b> | D<br><b>1</b> | Y<br><b>0 1 0 7</b>                      | Amount<br><b>\$50.00</b>  |
| Full Name of Contributor<br><b>David Huston</b>                                  |  |                    |                                         |               |               | Registration Number, if PAC              |                           |
| Street Address<br><b>14515 Robinson Rd.</b>                                      |  |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                           |
| City<br><b>Plain City</b>                                                        |  | State<br><b>OH</b> | Zip Code<br><b>43064</b>                | M<br><b>1</b> | D<br><b>1</b> | Y<br><b>0 1 0 7</b>                      | Amount<br><b>\$40.00</b>  |
| Full Name of Contributor<br><b>Emily Santner</b>                                 |  |                    |                                         |               |               | Registration Number, if PAC              |                           |
| Street Address<br><b>2650 Dayton Ave.</b>                                        |  |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                           |
| City<br><b>Columbus</b>                                                          |  | State<br><b>OH</b> | Zip Code<br><b>43202</b>                | M<br><b>1</b> | D<br><b>1</b> | Y<br><b>0 1 0 7</b>                      | Amount<br><b>\$10.00</b>  |

\* 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 **\$2,125.00**