

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full COMMITTEE TO SAVE SENIOR SERVICES									
Full Name of Contributor BETHANY R DOHNAL						Registration Number, if PAC			
Street Address 1705 MILFORD AVE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City MARYSVILLE			State O H		Zip Code 43040		M D Y 0 9 1 7 1 2		Amount 30.00
Full Name of Contributor JACQUELINE M. MARCHAN-RISH						Registration Number, if PAC			
Street Address 1505 CAMBRIDGE AVE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City MARBLE CLIFF			State O H		Zip Code 43040		M D Y 0 9 1 3 1 2		Amount 20.00
Full Name of Contributor HOPE L ROBERTS						Registration Number, if PAC			
Street Address 3034 WOODBINE PL			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS			State O H		Zip Code 43202		M D Y 0 9 1 6 1 2		Amount 20.00
Full Name of Contributor TERESA K BLACKWOOD						Registration Number, if PAC			
Street Address 2699 KENNY LANE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City GROVE CITY			State O H		Zip Code 43123		M D Y 0 9 2 0 1 2		Amount 30.00
Full Name of Contributor ERIKA F HEALY						Registration Number, if PAC			
Street Address 6371 SLEEPY MEADOW BLVD W			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City GROVE CITY			State O H		Zip Code 43123		M D Y 0 9 1 0 1 2		Amount 10.00
Full Name of Contributor ANDREA GOEHRING						Registration Number, if PAC			
Street Address 1184 PAREKWAY N			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS			State O H		Zip Code 43212		M D Y 0 9 2 0 1 2		Amount 10.00
Full Name of Contributor AMANDA A RIPKE						Registration Number, if PAC			
Street Address 520 E STANTON AVE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS			State O H		Zip Code 43214-1320		M D Y 0 9 2 0 1 2		Amount 20.00
Full Name of Contributor ELIZABETH G GOMIA						Registration Number, if PAC			
Street Address 346 PINNEY DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City WORTHINGTON			State O H		Zip Code 43085		M D Y 0 9 2 7 1 2		Amount 100.00

* 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 \$ **240.00**