

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Citizens for Corbin</u>							
Full Name of Contributor <u>JAMIE R. Wiegman</u>						Registration Number, if PAC	
Street Address <u>1102 Pinnacle Club Dr</u>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>ck</u>	
City <u>Grove City</u>		State <u>OH</u>		Zip Code <u>43123</u>		M <u>09</u>	D <u>24</u>
						Y <u>11</u>	Amount <u>50⁰⁰</u>
Full Name of Contributor <u>William E. SALTON</u>						Registration Number, if PAC	
Street Address <u>3703 Broadway</u>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>ck</u>	
City <u>Grove City</u>		State <u>OH</u>		Zip Code <u>43123</u>		M <u>09</u>	D <u>24</u>
						Y <u>11</u>	Amount <u>100⁰⁰</u>
Full Name of Contributor <u>Mark R. List</u>						Registration Number, if PAC	
Street Address <u>4596 Bent Creek Pl</u>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>ck</u>	
City <u>Grove City</u>		State <u>OH</u>		Zip Code <u>43123</u>		M <u>09</u>	D <u>24</u>
						Y <u>11</u>	Amount <u>25⁰⁰</u>
Full Name of Contributor <u>Leslie A. Bostic</u>						Registration Number, if PAC	
Street Address <u>1898 Seaside Circle</u>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>ck</u>	
City <u>Grove City</u>		State <u>OH</u>		Zip Code <u>43123</u>		M <u>09</u>	D <u>29</u>
						Y <u>11</u>	Amount <u>50⁰⁰</u>
Full Name of Contributor <u>Gus O'Day</u>						Registration Number, if PAC	
Street Address <u>11920 Scotch Darby Rd</u>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>ck</u>	
City <u>Orion</u>		State <u>OH</u>		Zip Code <u>43146</u>		M <u>09</u>	D <u>29</u>
						Y <u>11</u>	Amount <u>100⁰⁰</u>
Full Name of Contributor <u>Nancy B. Patzer</u>						Registration Number, if PAC	
Street Address <u>3639 Orders Rd</u>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>ck</u>	
City <u>Grove City</u>		State <u>OH</u>		Zip Code <u>43123</u>		M <u>09</u>	D <u>29</u>
						Y <u>11</u>	Amount <u>50⁰⁰</u>
Full Name of Contributor <u>Richard C. Jameson</u>						Registration Number, if PAC	
Street Address <u>6151 Seneca Ct</u>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>ck</u>	
City <u>Grove City</u>		State <u>OH</u>		Zip Code <u>43123</u>		M <u>09</u>	D <u>29</u>
						Y <u>11</u>	Amount <u>50⁰⁰</u>
Full Name of Contributor <u>Pamela S. Harrison</u>						Registration Number, if PAC	
Street Address <u>5975 Grant Run Pl</u>				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>ck</u>	
City <u>Grove City</u>		State <u>OH</u>		Zip Code <u>43123</u>		M <u>09</u>	D <u>29</u>
						Y <u>11</u>	Amount <u>30⁰⁰</u>

* 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 \$ 455⁰⁰