## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Walsh For Bexley				
Full Name of Contributor			Registration Number, if PAC	
Margaret Baker				
Street Address	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.)
955 S. Roosevelt Ave.				PayPal
City Bexley	Stake OH	Zip Code 43209	0 9 0 3 1 7	Amount \$20.00
Full Name of Contributor	J		Registration Number, if P	AC
Jenn Salgle				_
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
214 N Stanwood Road				Anedot
City	State	Zip Code 43209	M D Y 0 9 1 3 1 7	Amount \$25.00
Bexley Full Name of Contributor	OH	43203		
Megan McGinnis			Registration Number, if P	AC
Street Address	Employer/Occu	ipation/Labor Organization		Form (Cash, Check, etc.)
1017 S. Remington		<u> </u>		PayPal
City Bexley	State OH	Zip Code 43209	$\begin{bmatrix} 0^{\mathbf{M}} \\ 0^{\mathbf{M}} \\ 9 \end{bmatrix} \begin{bmatrix} 0^{\mathbf{D}} \\ 1^{\mathbf{M}} \\ 9 \end{bmatrix} \begin{bmatrix} 1^{\mathbf{Y}} \\ 1^{\mathbf{Y}} \\ 7 \end{bmatrix} $	Amount \$10.00
Full Name of Contributor	<u> </u>		Registration Number, if P	AC
Elizabeth Simcox				
Street Address	Employer/Occu	ipation/Labor Organization		Form (Cash, Check, etc.)
4455 Iris Ct				Anedot
City  LEWIS CENTER	State OH	Zip Code 43035	0 9 1 5 1 7	Amount \$250.00
Full Name of Contributor Christopher Weyand			Registration Number, if P	AC
Street Address				Form (Cash, Check, etc.)
1005 S. Remington Rd	Employer/Occu	pation/Labor Organization		Cash
City	State	Zip Code	M D Y	Amount
Bexley	OH	43209	0 9 0 8 1 7	\$100.00
Full Name of Contributor	······································		Registration Number, if P	AC
April Walsh				
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
1005 S. Remington Rd				Cash
City Bexley	State OH	Zip Code 43209	0 9 0 B 1 7	Amount \$100.00
Full Name of Contributor			Registration Number, if P	
Walsh for Madison Township			itegiou duvi i vamou, a a	AC
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
4444 Winchester Pike				PayPal
City Columbus	State OH	Zip Code 43232	0 8 2 4 1 7	Amount \$50.00
Full Name of Contributor  Edward Nyhan	•		Registration Number, if P	AC
Street Address	Employer/Oce	pation/Labor Organization*		Form (Cash, Check, etc.)
837 S. Remington Rd				PayPal
City Bexley	State OH	Zip Code 43209	0 9 1 5 1 7	Amount \$25.00
Devieh	) UIT	73203	10   8   1   5   1   7	ゆとひ.ひひ

Page Total \$580.00

<sup>\*</sup> 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)]