

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

|   |  |                    |  |  |               |  |               |               |                           |
|---|--|--------------------|--|--|---------------|--|---------------|---------------|---------------------------|
| Name of Committee in Full<br><b>Heckman for Westerville</b> |  |                    |  |  |               |  |               |               |                           |
| Full Name of Contributor<br><b>Karen S. Shaffer</b>         |  |                    |  |  |               | Registration Number, if PAC<br><b>NA</b> |               |               |                           |
| Street Address<br><b>1002 Corbin Ct</b>                     |  |                    | Employer/Occupation/Labor Organization*<br><b>NA</b> |  |               | Form (Cash, Check, etc.)<br><b>Check</b> |               |               |                           |
| City<br><b>Westerville</b>                                  |  | State<br><b>OH</b> | Zip Code<br><b>43081</b>                             |  | M<br><b>0</b> | D<br><b>9</b>                            | Y<br><b>1</b> | Y<br><b>0</b> | Amount<br><b>\$50.00</b>  |
| Full Name of Contributor<br><b>Andy Igonor</b>              |  |                    |  |  |               | Registration Number, if PAC<br><b>NA</b> |               |               |                           |
| Street Address<br><b>363 Tipperary Loop</b>                 |  |                    | Employer/Occupation/Labor Organization*<br><b>NA</b> |  |               | Form (Cash, Check, etc.)<br><b>Check</b> |               |               |                           |
| City<br><b>Delaware</b>                                     |  | State<br><b>OH</b> | Zip Code<br><b>43015</b>                             |  | M<br><b>0</b> | D<br><b>8</b>                            | Y<br><b>1</b> | Y<br><b>7</b> | Amount<br><b>\$100.00</b> |
| Full Name of Contributor<br><b>Craig Eppley</b>             |  |                    |  |  |               | Registration Number, if PAC<br><b>NA</b> |               |               |                           |
| Street Address<br><b>636 Kingfisher Ct</b>                  |  |                    | Employer/Occupation/Labor Organization*<br><b>NA</b> |  |               | Form (Cash, Check, etc.)<br><b>Cash</b>  |               |               |                           |
| City<br><b>Westerville</b>                                  |  | State<br><b>OH</b> | Zip Code<br><b>43082</b>                             |  | M<br><b>0</b> | D<br><b>8</b>                            | Y<br><b>1</b> | Y<br><b>8</b> | Amount<br><b>\$20.00</b>  |
| Full Name of Contributor<br><b>Tom Marshall-Goetz</b>       |  |                    |  |  |               | Registration Number, if PAC<br><b>NA</b> |               |               |                           |
| Street Address<br><b>289 Mary Avenue</b>                    |  |                    | Employer/Occupation/Labor Organization*<br><b>NA</b> |  |               | Form (Cash, Check, etc.)<br><b>Check</b> |               |               |                           |
| City<br><b>Westerville</b>                                  |  | State<br><b>OH</b> | Zip Code<br><b>43081</b>                             |  | M<br><b>0</b> | D<br><b>8</b>                            | Y<br><b>2</b> | Y<br><b>0</b> | Amount<br><b>\$25.00</b>  |
| Full Name of Contributor<br><b>Nancy Lindimore</b>          |  |                    |  |  |               | Registration Number, if PAC<br><b>NA</b> |               |               |                           |
| Street Address<br><b>8256 Snead Way</b>                     |  |                    | Employer/Occupation/Labor Organization*<br><b>NA</b> |  |               | Form (Cash, Check, etc.)<br><b>Check</b> |               |               |                           |
| City<br><b>Westerville</b>                                  |  | State<br><b>OH</b> | Zip Code<br><b>43081</b>                             |  | M<br><b>0</b> | D<br><b>8</b>                            | Y<br><b>2</b> | Y<br><b>9</b> | Amount<br><b>\$50.00</b>  |
| Full Name of Contributor<br><b>Jim Alavi</b>                |  |                    |  |  |               | Registration Number, if PAC<br><b>NA</b> |               |               |                           |
| Street Address<br><b>217 Dunbarton Rd</b>                   |  |                    | Employer/Occupation/Labor Organization*<br><b>NA</b> |  |               | 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>0</b> | D<br><b>9</b>                            | Y<br><b>0</b> | Y<br><b>4</b> | Amount<br><b>\$500.00</b> |
| Full Name of Contributor<br><b>Margaret Duffy</b>           |  |                    |  |  |               | Registration Number, if PAC<br><b>NA</b> |               |               |                           |
| Street Address<br><b>14 S Spring Rd</b>                     |  |                    | Employer/Occupation/Labor Organization*<br><b>NA</b> |  |               | Form (Cash, Check, etc.)<br><b>Check</b> |               |               |                           |
| City<br><b>Westerville</b>                                  |  | State<br><b>OH</b> | Zip Code<br><b>43081</b>                             |  | M<br><b>0</b> | D<br><b>6</b>                            | Y<br><b>1</b> | Y<br><b>0</b> | Amount<br><b>\$25.00</b>  |
| Full Name of Contributor<br><b>Marian Harris</b>            |  |                    |  |  |               | Registration Number, if PAC<br><b>NA</b> |               |               |                           |
| Street Address<br><b>5145 Holbrook Dr</b>                   |  |                    | Employer/Occupation/Labor Organization*<br><b>NA</b> |  |               | Form (Cash, Check, etc.)<br><b>Check</b> |               |               |                           |
| City<br><b>Columbus</b>                                     |  | State<br><b>OH</b> | Zip Code<br><b>43232</b>                             |  | M<br><b>0</b> | D<br><b>6</b>                            | Y<br><b>1</b> | Y<br><b>0</b> | Amount<br><b>\$25.00</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 **\$795.00**