

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens For A Safer Obetz						
Full Name of Contributor Ryan Debolt				Registration Number, if PAC		
Street Address 4175 Alum Creek Drive		Employer/Occupation/Labor Organization* Village of Obetz/Police Officer			Form (Cash, Check, etc.) Check	
City Obetz	State OH	Zip Code 43207	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Joseph Jacobson				Registration Number, if PAC		
Street Address 4175 Alum Creek Drive		Employer/Occupation/Labor Organization* Village of Obetz/Police Officer			Form (Cash, Check, etc.) Cash	
City Obetz	State OH	Zip Code 43207	M 0	D 9	Y 2	Amount \$80.00
Full Name of Contributor Eric J. Baker				Registration Number, if PAC		
Street Address 4175 Alum Creek Drive		Employer/Occupation/Labor Organization* Village of Obetz/Police Officer			Form (Cash, Check, etc.) Check	
City Obetz	State OH	Zip Code 43207	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Douglas Ellison				Registration Number, if PAC		
Street Address 4175 Alum Creek Drive		Employer/Occupation/Labor Organization* Village of Obetz/Police Officer			Form (Cash, Check, etc.) Cash	
City Obetz	State OH	Zip Code 43207	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Ken's Atlantic Towing LLC				Registration Number, if PAC		
Street Address 1580 Rathmell Road		Employer/Occupation/Labor Organization* Local Business			Form (Cash, Check, etc.) Check	
City Lockbourne	State OH	Zip Code 43137	M 0	D 9	Y 2	Amount \$500.00
Full Name of Contributor Donald Clark				Registration Number, if PAC		
Street Address 4175 Alum Creek Drive		Employer/Occupation/Labor Organization* Village of Obetz/Police Officer			Form (Cash, Check, etc.) Check	
City Obetz	State OH	Zip Code 43207	M 0	D 9	Y 3	Amount \$100.00
Full Name of Contributor Brian Jeffers				Registration Number, if PAC		
Street Address 4175 Alum Creek Drive		Employer/Occupation/Labor Organization* Village of Obetz/Police Officer			Form (Cash, Check, etc.) Cash	
City Obetz	State OH	Zip Code 43207	M 1	D 0	Y 0	Amount \$100.00
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
	OH					

* 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)]