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## Statement of Contributions Received

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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	<del></del>						
4175 Alum Creek Drive		pation/Labor Organization* f Obetz/Police Officer		Form (Cash, Check, etc.) Check			
City	State	Zip Code	M D Y	Amount			
Obetz	OH	43207	0 9 2 4 1 4	\$100.00			
Full Name of Contributor	Registration Number, if I	PAC					
Joseph Jacobson							
Street Address	Employenoccupation			Form (Cash, Check, etc.)			
4175 Alum Creek Drive		f Obetz/Police Officer	<del></del>	Cash			
City Obetz	OH	Zip Code 43207	0 9 2 4 1 4	Amount \$80.00			
	1 011	43207	FIFT				
Full Name of Contributor  Eric J. Baker							
Street Address	Employer, Occu	pation Labor Organization		Form (Cash, Check, etc.)			
4175 Alum Creek Drive	Village of	Obetz/Police Officer		Check			
City Obetz	State OH	Zip Code 43207	0 9 2 5 1 4	Amount \$100.00			
Full Name of Contributor	<u> </u>		Registration Number, if I	PAC			
Douglas Ellison							
Street Address	pation/Labor Organization		Form (Cash, Check, etc.)				
4175 Alum Creek Drive	Village of	Obetz/Police Officer		Cash			
City	State	Zip Code 43207	N D Y 0 9 2 6 1 4	Amount			
Obetz	ОН	43207	1 1 1 1 1	\$100.00			
Full Name of Contributor  Ken's Atlantic Towing LLC  Registration Number, if PAC							
Street Address	<del></del>	Form (Cash, Check, etc.)					
1580 Rathmell Road	Local Busi	ness		Check			
City	State	Zip Code	N D Y 4	Amount			
Lockbourne	OH	43137		\$500.00			
Full Name of Contributor Donald Clark	Registration Number, if PAC						
Street Address	Employer, Occu	pation/Labor Organization	•	Form (Cash, Check, etc.)			
4175 Alum Creek Drive	Village of	Obetz/Police Officer		Check			
City Obetz	State OH	Zip Code 43207	M D N 0 9 3 0 1 4	Amount \$100.00			
Full Name of Contributor	<del></del>	·	Registration Number, if I	AC			
Brian Jeffers							
Street Address	<del></del>	Form (Cash, Check, etc.)					
4175 Alum Creek Drive	Village of 0	Obetz/Police Officer		Cash			
City Obetz	Staire OH	Zip Code 43207	1 0 0 3 1 4	Amount \$100.00			
Full Name of Contributor	Registration Number, if I	AC					
Street Address	Employer Occur	pation Labor Organization		Form (Cash, Check, etc.)			
•	Employ en Occu	panon Labor Organization		3.00			
City	State OH	Zip Code	M D Y	Amount			

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)]