

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full COMMITTEE FOR THE COLUMBUS ZOO LEVY											
Full Name of Contributor THE COLUMBUS ZOOLOGICAL PARK ASSOCIATION						Registration Number, if PAC					
Street Address 4850 POWELL ROAD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) WIRE - ACH					
City POWELL		State OH	Zip Code 43065		M 0	D 2	Y 2	Y 6	Y 1	Y 5	Amount \$75,000.00
Full Name of Contributor AMERICAN ELECTRIC POWER OHIO POWER CO-DISTRIBUTION						Registration Number, if PAC					
Street Address PO BOX 24400			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City COLUMBUS		State OH	Zip Code 44701		M 0	D 5	Y 1	Y 5	Y 1	Y 5	Amount \$25,000.00
Full Name of Contributor DONNA ZUIDERWEG						Registration Number, if PAC					
Street Address 4431 GREYHILL STREET			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City NEW ALBANY		State OH	Zip Code 43054		M 0	D 5	Y 1	Y 5	Y 1	Y 5	Amount \$500.00
Full Name of Contributor THE COLUMBUS ZOOLOGICAL PARK ASSOCIATION						Registration Number, if PAC					
Street Address 4850 POWELL ROAD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) WIRE-ACH					
City POWELL		State OH	Zip Code 43065		M 0	D 6	Y 2	Y 6	Y 1	Y 5	Amount \$44,000.00
Full Name of Contributor JOHN MATESICH III						Registration Number, if PAC					
Street Address 2417 OAK MEADOW LANE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City ZANESVILLE		State OH	Zip Code 43701		M 0	D 6	Y 1	Y 7	Y 1	Y 5	Amount \$500.00
Full Name of Contributor JANIS ROSENTHAL						Registration Number, if PAC					
Street Address 8429 TIBBERMORE COURT			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City DUBLIN		State OH	Zip Code 43017		M 0	D 6	Y 1	Y 7	Y 1	Y 5	Amount \$100.00
Full Name of Contributor JACK HANNA						Registration Number, if PAC					
Street Address PO BOX 1450			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City POWELL		State OH	Zip Code 43065		M 0	D 6	Y 1	Y 8	Y 1	Y 5	Amount \$2,500.00
Full Name of Contributor THOMAS STOCKDALE						Registration Number, if PAC					
Street Address 4586 STARRETT ROAD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK					
City COLUMBUS		State OH	Zip Code 43214		M 0	D 6	Y 2	Y 0	Y 1	Y 5	Amount \$100.00

* 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 **\$147,700.00**