

## Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full									
Full Name of Contributor <i>Michele Schaffer</i>							Registration Number, if PAC		
Street Address <i>4368 Greensbury</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>		
City <i>New Albany</i>		State <i>OH</i>		Zip Code <i>43054</i>		M		D Y	
Full Name of Contributor <i>Amy Cook</i>							Registration Number, if PAC		
Street Address <i>7766 Nichols Ln</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>\$</i>		
City <i>Johnstown</i>		State <i>OH</i>		Zip Code <i>43031</i>		M		D Y	
Full Name of Contributor <i>Michelle Kuebler</i>							Registration Number, if PAC		
Street Address <i>161 Mannaseh Dr. E</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>		
City <i>E Granville</i>		State <i>OH</i>		Zip Code <i>43023</i>		M		D Y	
Full Name of Contributor <i>Sara Cofer</i>							Registration Number, if PAC		
Street Address <i>6852 Cedarbrook Glen</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>		
City <i>New Albany</i>		State <i>OH</i>		Zip Code <i>43054</i>		M		D Y	
Full Name of Contributor <i>Joe Armpriester</i>							Registration Number, if PAC		
Street Address <i>6672 Bailey Circle</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>		
City <i>Galena</i>		State <i>OH</i>		Zip Code <i>43021</i>		M		D Y	
Full Name of Contributor <i>Veronica Stryjewski</i>							Registration Number, if PAC		
Street Address <i>1314 Haines Ave</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>		
City <i>Columbus</i>		State <i>OH</i>		Zip Code <i>43212</i>		M		D Y	
Full Name of Contributor <i>Celisa Finley</i>							Registration Number, if PAC		
Street Address <i>161 Mohican Lane</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>		
City <i>Pataskala</i>		State <i>OH</i>		Zip Code <i>43062</i>		M		D Y	
Full Name of Contributor <i>Emily Martin</i>							Registration Number, if PAC		
Street Address <i>5300 Snyder Loop</i>				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Cash</i>		
City <i>New Albany</i>		State <i>OH</i>		Zip Code <i>43054</i>		M		D Y	

\* 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)]