Statement of Contributions Received

Page _____

Prescribed by Secretary of State 03/05

Name of Committee in Full Reynoldsburg Republican Club				
Full Name of Contributor Bill & Cindy Balach			Registration Number, if PAC	
Street Address 8109 Priestly	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)
City Reynoldsburg	State OH	Zip Code 43068	D 1 2 6 1 6	Amount \$20.00
Full Name of Contributor Registration Number, if PAC ROD & Penny Basye				AC .
Street Address 8785 Linick	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
_{City} Reynoldsburg	State OH	Zip Code 43068	0 1 2 6 1 6	Amount \$20.00
Full Name of Contributor Brad & Stephanie McCloud Registration Number, if PAC				PAC
Street Address 912 Rosehill	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check
City Reynoldsburg	State OH	Zip Code 43068	0 1 2 6 1 6	Amount \$20.00
Full Name of Contributor Chris & Sandy Long				
Street Address 1475 Haft Dr	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) check
City Reynoldsburg	State OH	Zip Code 43068	0 1 2 6 1 6	Amount \$20.00
Full Name of Contributor Jen Tock Registration Number, if PAC				
Street Address 1259 Lancaster Ave	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
City Reynoldsburg	State OH	Zip Code 43068	0 1 2 6 1 6	Amount \$10.00
Name of Contributor Registration Number, if Steve Cicak			PAC	
Street Address -6866 Roundelay	Employer/Occi	upation/Labor Organization*		Form (Cash, Check, etc.)
City Reynoldsburg	State OH	Zip Code 43068	D 1 2 6 1 6	Amount \$10.00
Full Name of Contributor Registration Number, if P Brad Luzader				PAC
Street Address 1116 Gibson	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash
City Reynoldsburg	State OH	Zip Code 43068	M D Y D 1 1 2 6 1 6	Amount \$10.00
Full Name of Contributor Pat Mahaffey Registration Number, if PAC				
Street Address 8135 Reynoldswood Dr	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)
City Reynoldsburg	State OH	Zip Code 43068	0 1 2 6 1 6	Amount

Page Total \$120.00

^{*}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 vindividual'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)]