

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full COMMITTEE TO RE-ELECT BUCK AND EARMAN							
Full Name of Contributor John and Nancy Bryner					Registration Number, if PAC		
Street Address 5418 Richlane Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 1 6	Y 0 9	Amount 50.00	
Full Name of Contributor Charles and Mary Buck					Registration Number, if PAC		
Street Address 4814 Canterwood Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 1 6	Y 0 9	Amount 6,000.00	
Full Name of Contributor Larry and Linda Earman					Registration Number, if PAC		
Street Address 4369 Shire Creek Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 1 6	Y 0 9	Amount 4,000.00	
Full Name of Contributor David and Carolyn Reed					Registration Number, if PAC		
Street Address 2698 Rosebush Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 2 0	Y 0 9	Amount 50.00	
Full Name of Contributor David and Lana Ahlum					Registration Number, if PAC		
Street Address 8501 Patterson Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 2 0	Y 0 9	Amount 100.00	
Full Name of Contributor David and Suzanne Knopp					Registration Number, if PAC		
Street Address 3522 Darbyshire Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 2 0	Y 0 9	Amount 30.00	
Full Name of Contributor Will and Phyllis Ernst					Registration Number, if PAC		
Street Address 4643 Schirtzinger Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 2 7	Y 0 9	Amount 250.00	
Full Name of Contributor Michael and Debra Stoner					Registration Number, if PAC		
Street Address 4200 Dublin Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1 0	D 2 7	Y 0 9	Amount 50.00	

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 10,530.00