

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Upchurch, Harkins, and Vaile for Change							
Full Name of Contributor Bob Taylor					Registration Number, if PAC		
Street Address rtaylor.55@gmail.com		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue donation		
City	State	Zip Code	M	D	Y	Amount	
			0	5	1	7	100.00
Full Name of Contributor Asher Pollock					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue donation		
City	State	Zip Code	M	D	Y	Amount	
			0	5	1	7	30.00
Full Name of Contributor Kerry Ragsdale					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue donation		
City	State	Zip Code	M	D	Y	Amount	
			0	5	1	7	39.05
Full Name of Contributor Carl Smith					Registration Number, if PAC		
Street Address 501 E Maynard Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O	Zip Code H 43202	M	D	Y	Amount	
			0	4	1	7	50.00
Full Name of Contributor Louis Flocker					Registration Number, if PAC		
Street Address 810 Oxford St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Worthington	State O	Zip Code H 43085	M	D	Y	Amount	
			0	4	1	7	50.00
Full Name of Contributor Elizabeth Langford					Registration Number, if PAC		
Street Address 1773 Northwest Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O	Zip Code H 43212	M	D	Y	Amount	
			0	4	1	7	30.00
Full Name of Contributor Bruce Dooley					Registration Number, if PAC		
Street Address 252 W 5th Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O	Zip Code H 43212	M	D	Y	Amount	
			0	4	1	7	200.00
Full Name of Contributor Mery Mattison					Registration Number, if PAC		
Street Address 164 Meadowlark Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Columbus	State O	Zip Code H 43214	M	D	Y	Amount	
			0	4	1	7	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 \$ 549.05