31-A	
R C 3517	10

## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Ted Berry						-	
Full Name of Contributor Alban Cost Account			Registra	ation Numb	er, if Pa	NC	
Street Address 7100 N High St, Suite 102	Employer/Occu	pation/Labor Organization*			_	Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	0 5	1 6	1 6	Amount \$100.00	
Full Name of Contributor Thomas Mannix			Registra	ition Numb	er, if PA	AC	
Street Address 112 Rockford Ave	Employer/Occu	pation/Labor Organization	<u>-</u>			Form (Cash. Check. etc.) Credit Card	
City Forest Park	Stalle	Zip Code 60130	0 3	0 2		Amount \$25.00	
Full Name of Contributor  Donna Jenkins  Registration Number, if I					er, if PA	AC.	
Street Address 327 N Pearl St	Employer/Occu	loyer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card	
City Granville	State OH	Zip Code 43023	0 5	1 3	1 6	Amount \$25.00	
Full Name of Contributor  James Bowling	Registration Number, if P.				er, if Pz	AC	
Street Address 2159 River Run Trce	Employer/Occu	Employer/Occupation/Labor Organization*			-:	Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43235	0 5	D 1 6 1	۲] 6	Amount \$50.00	
Full Name of Contributor Registration Number, if PAC							
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y	Amount	
Full Name of Contributor Registration Number, it I					er, it P	NC .	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y	Amount	
Full Name of Contributor Registration Number, if F					er, if PA	AC.	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
City	Stage OH	Zip Code	M	D'	Y	Amount	
Full Name of Contributor Registration Number, it P.					er, (f PA	AC .	
Street Address	Employer-Occupation/Labor Organization				Form (Cash, Check, etc.)		
City	State OH	Zip Code	M	D	Y	Amount	

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 \$200.00