

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>CITIZENS FOR STEPHANIE KUNZE</b>									
Full Name of Contributor <b>Total Contributions from form no. 31-E</b>							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check/Cash	
City				State <b>OH</b>		Zip Code		M D Y Amount <b>\$1,180.00</b>	
Full Name of Contributor <b>William D Marshall</b>							Registration Number, if PAC		
Street Address <b>3230 Waterford Drive</b>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City <b>Lewis Center</b>				State <b>OH</b>		Zip Code <b>43053</b>		M D Y <b>0 2 2 7 0 9</b> Amount <b>\$25.00</b>	
Full Name of Contributor <b>Citizens to Elect Tim Roberts</b>							Registration Number, if PAC		
Street Address <b>5307 Franklin Street</b>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City <b>Hilliard</b>				State <b>OH</b>		Zip Code <b>43026</b>		M D Y <b>0 3 0 4 0 9</b> Amount <b>\$100.00</b>	
Full Name of Contributor <b>Christine Mazer</b>							Registration Number, if PAC		
Street Address <b>3362 Harbor Bay Drive</b>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City <b>Columbus</b>				State <b>OH</b>		Zip Code		M D Y <b>0 3 0 6 0 9</b> Amount <b>\$15.00</b>	
Full Name of Contributor <b>Mary Leder</b>							Registration Number, if PAC		
Street Address <b>4549 Trailane Drive</b>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City <b>Hilliard</b>				State <b>OH</b>		Zip Code <b>43026</b>		M D Y <b>0 3 1 6 0 9</b> Amount <b>\$25.00</b>	
Full Name of Contributor <b>Beth Anne Kauffman</b>							Registration Number, if PAC		
Street Address <b>4749 Riverwood Drive</b>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City <b>Hilliard</b>				State <b>OH</b>		Zip Code <b>43026</b>		M D Y <b>0 3 1 6 0 9</b> Amount <b>\$25.00</b>	
Full Name of Contributor <b>Melinda Cook</b>							Registration Number, if PAC		
Street Address <b>4153 Stargrass Court</b>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City <b>Hilliard</b>				State <b>OH</b>		Zip Code <b>43026</b>		M D Y <b>0 3 2 4 0 9</b> Amount <b>\$125.00</b>	
Full Name of Contributor <b>Dianne Moyer</b>							Registration Number, if PAC		
Street Address <b>47521 Scenic Circle Drive</b>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City <b>Canton</b>				State <b>MI</b>		Zip Code <b>48188</b>		M D Y <b>0 3 2 4 0 9</b> Amount <b>\$200.00</b>	

\* 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)]