

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full COMMITTEE FOR THE COLUMBUS ZOO LEVY									
Full Name of Contributor OHIOHEALTH						Registration Number, if PAC			
Street Address 180 EAST BROAD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) WIRE			
City COLUMBUS		State OH	Zip Code 43215		M 1	D 0	Y 0	Y 3	Amount \$10,000.00
Full Name of Contributor ONEIL AWNING & TENT CO., INC.						Registration Number, if PAC			
Street Address 895 W. WALNUT STREET			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK			
City CANAL WINCHETER		State OH	Zip Code 43110		M 1	D 0	Y 0	Y 2	Amount \$1,000.00
Full Name of Contributor HUNTINGTON NATIONAL BANK						Registration Number, if PAC			
Street Address PO BOX 1558			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK			
City COLUMBUS		State OH	Zip Code 43219		M 0	D 9	Y 2	Y 5	Amount \$30,000.00
Full Name of Contributor LOUIS R. POLSTER						Registration Number, if PAC			
Street Address PO BOX 2016			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK			
City COLUMBUS		State OH	Zip Code 43216		M 1	D 0	Y 0	Y 2	Amount \$1,000.00
Full Name of Contributor JOHN I CADWALLADER						Registration Number, if PAC			
Street Address 182 UPPER CHELSEA ROAD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK			
City COLUMBUSQ		State OH	Zip Code 43212		M 1	D 0	Y 0	Y 1	Amount \$150.00
Full Name of Contributor MESSER CONSTRUCTION CO.						Registration Number, if PAC			
Street Address 5158 FISHWICK DRIVE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK			
City CINCINNATI		State OH	Zip Code 45216		M 0	D 8	Y 2	Y 1	Amount \$2,500.00
Full Name of Contributor PRATER ENGINEERING ASSOCIATES, INC.						Registration Number, if PAC			
Street Address 6130 WILCOX ROAD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK			
City DUBLIN		State OH	Zip Code 43015		M 0	D 9	Y 0	Y 8	Amount \$250.00
Full Name of Contributor MARIAN SUE CONRAD						Registration Number, if PAC			
Street Address 8039 CROSSGATE CT S			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK			
City DUBIN		State OH	Zip Code 43017		M 0	D 8	Y 2	Y 5	Amount \$100.00

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