

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Richard Sharp for Bexley City Council							
Full Name of Contributor Gerald Maloney					Registration Number, if PAC		
Street Address 275 S. Parkview		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 1	Amount 100.00	
Full Name of Contributor Larry Heiser					Registration Number, if PAC		
Street Address 936 Vernon		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 1	Amount 25.00	
Full Name of Contributor Dorothy McCoy					Registration Number, if PAC		
Street Address 73 N. Roosevelt Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 1	Amount 50.00	
Full Name of Contributor Julia Heiser					Registration Number, if PAC		
Street Address 788 Chelsea		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 1	Amount 50.00	
Full Name of Contributor Katie Boone					Registration Number, if PAC		
Street Address 33 S. Ardmore Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 1	Amount 25.00	
Full Name of Contributor Cheryl Enders					Registration Number, if PAC		
Street Address 904 College Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 1	Amount 25.00	
Full Name of Contributor Keith Miller					Registration Number, if PAC		
Street Address 218 N. Ardmore Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 1	Amount 10.00	
Full Name of Contributor Larry Ruben					Registration Number, if PAC		
Street Address 140 S. Columbia Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 1	Amount 250.00	

* 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 \$ **535.00**