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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full								
LEVYFACTS.COM				_				
Full Name of Contributor		•	Registrati	ion Numl	oer, if PA	С		
JAMES BURGESS								
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)		
174 BARCELONA AVE					CHECK			
City	State	Zip Code	М	D	Y	Amount		
WESTERVILLE	O   H	43081	0 9		1 1		500.00	
Full Name of Contributor		•	Registrati	ion Num	ber, if PA	С		
KURT HINTERSCHIED					_			
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
921 S HEMPSTEAD RD						CHECK		
City	State	Zip Code	М	D	Y	Amount		
WESTERVILLE	$O \mid H$	43081	0 9	0 7	1 1		100.00	
Full Name of Contributor			Registrat			C		
CASH								
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
		ETING EVENT					CASH	
City	State	Zip Code	М	D	Y	Amount		
WESTERVILLE	OLH	1 -	nie	0 8	111		42.00	
Full Name of Contributor		10001	Registrat			.c		
ERIC NORDMAN					,			
Street Address	· Employer/Occu	pation/Labor Organization*				Form (Cash, Che	eck, etc.)	
	Limployen seed	parion and or gamman		CHECK				
96 E COLLEGE AVE	State	Zip Code	М	D	Y	Amount	•	
City				0 8		ranoum	25.00	
WESTERVILLE	O   H	43081	U 9 Registrat				25.00	
Full Name of Contributor			Registrat	ion Num	Der, it i zi			
MARGARET DUFFY						In (Cook Che	- alc ara )	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
14 S SPRING RD		T	1 1		1	CARD		
City	State	Zíp Code	M	D	Y	Amount	25.00	
WESTERVILLE	O H	43081	0 9		1 1	<u> </u>	35.00	
Full Name of Contributor			Registrat	tion Num	ber, it PA	iC .		
CASH								
Street Address	' '	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
	TEA PA	ARTY EVENT				CASH		
City	State	Zip Code	M	D	Į Y	Amount		
WESTERVILLE	O   H	43081					90.00	
Full Name of Contributor			Registrat	tion Num	ber, if PA	AC .		
WILLIAM YUHAS							,	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Che		
74 MARLENE DR					CHECK			
City	State	Zip Code	М	Ð	Y	Amount		
WESTERVILLE	O   H	43081	0 9				25.00	
Full Name of Contributor			Registrat	tion Num	ber, if PA	AC .		
THOMAS OSIF								
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
496 STRATION SQ						CHECK		
City	State	Zip Code	М	D	Y	Amount		
WESTERVILLE	O   H	43082	0 9	1 3	1   1		50.00	
1120121,1122						name of the		

Page Total \$ 867.00

<sup>\*</sup> 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)]