

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full									
Full Name of Contributor ERICA DONAHOE						Registration Number, if PAC			
Street Address 8371 Berylhymen Rd			Employer/Occupation/Labor Organization* NAPLS			Form (Cash, Check, etc.) check			
City Wlsterville		State OH	Zip Code 43081		M	D	Y	Amount 10.00	
Full Name of Contributor Paul Elsey						Registration Number, if PAC			
Street Address 3269 Wind Dr			Employer/Occupation/Labor Organization* NAPLS			Form (Cash, Check, etc.) Cash			
City Lewis Center		State OH	Zip Code 43035		M	D	Y	Amount 5.00	
Full Name of Contributor SUSAN WOODMANSEE						Registration Number, if PAC			
Street Address 7256 Hopewell Ct.			Employer/Occupation/Labor Organization* NAPLS			Form (Cash, Check, etc.) Cash			
City DUBLIN		State OH	Zip Code 43017		M	D	Y	Amount 20.00	
Full Name of Contributor SANDY REED						Registration Number, if PAC			
Street Address 2647 PATTERSON RD SW			Employer/Occupation/Labor Organization* NAPLS			Form (Cash, Check, etc.) Cash			
City PATASKALA		State OH	Zip Code 43082		M	D	Y	Amount \$10.00	
Full Name of Contributor Ryan Hoobler						Registration Number, if PAC			
Street Address 2533 Bristol Rd.			Employer/Occupation/Labor Organization* NAPLS			Form (Cash, Check, etc.) Cash			
City Upper Arlington		State OH	Zip Code 43221		M	D	Y	Amount \$5	
Full Name of Contributor Melissa Stultz						Registration Number, if PAC			
Street Address 115 Forbidden Lakes Ct.			Employer/Occupation/Labor Organization* NAPLS			Form (Cash, Check, etc.) check			
City Johnstown		State OH	Zip Code 43031		M	D	Y	Amount 10.00	
Full Name of Contributor Patricia Randall						Registration Number, if PAC			
Street Address 5890 Winslow Ct.			Employer/Occupation/Labor Organization* Teacher			Form (Cash, Check, etc.) Check			
City Dublin		State OH	Zip Code 43016		M	D	Y	Amount 5.00	
Full Name of Contributor Jeanyoung Crebbint						Registration Number, if PAC			
Street Address 1256 Venetian Ct.			Employer/Occupation/Labor Organization* Teacher at NAPLS			Form (Cash, Check, etc.) cash			
City Gahanna		State OH	Zip Code 43230		M	D	Y	Amount 5.00	

* 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)]