

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full COMMITTEE TO RE-ELECT BUCK AND EARMAN							
Full Name of Contributor Jean Junk					Registration Number, if PAC		
Street Address 3722 East Link Circle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 1 1	Y 0 9	Amount 100.00	
Full Name of Contributor Norman and Joan McElheny					Registration Number, if PAC		
Street Address 3825 Dayspring Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 1 1	Y 0 9	Amount 50.00	
Full Name of Contributor James and Lois Rice					Registration Number, if PAC		
Street Address 3396 Braidwood Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 1 1	Y 0 9	Amount 50.00	
Full Name of Contributor Hassan and Farzaneh Saadat					Registration Number, if PAC		
Street Address 4810 Canterwood Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 1 1	Y 0 9	Amount 50.00	
Full Name of Contributor Mary Lou Wood					Registration Number, if PAC		
Street Address 4786 Hillcrest Street, South		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 1 1	Y 0 9	Amount 100.00	
Full Name of Contributor Larry Earman					Registration Number, if PAC		
Street Address 4369 Shire Creek Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 0 9	Y 0 9	Amount 2,000.00	
Full Name of Contributor C. F. Csetri					Registration Number, if PAC		
Street Address 4375 Shire Creek Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 1 6	Y 0 9	Amount 50.00	
Full Name of Contributor John and Mary Deininger					Registration Number, if PAC		
Street Address 3661 Lagoon Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0 9	D 1 6	Y 0 9	Amount 50.00	

* 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 \$ **2,450.00**