

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee to Elect Mayton							
Full Name of Contributor Worthington Republican Women					Registration Number, if PAC		
Street Address 7662 Cloister Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Worthington	State O H	Zip Code 43085	M 1 0	D 3 0	Y 1 3	Amount 50.00	
Full Name of Contributor Tera D. Myhal					Registration Number, if PAC		
Street Address 4854 Brooksvew Cir		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City New Albany	State O H	Zip Code 43054	M 1 1	D 0 6	Y 1 3	Amount 100.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
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City	State	Zip Code	M	D	Y	Amount	
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City	State	Zip Code	M	D	Y	Amount	
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City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]