

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Will Petrik for Columbus</b>									
Full Name of Contributor <b>Karyn Deibel</b>						Registration Number, if PAC			
Street Address <b>166 W. Como</b>			Employer/Occupation/Labor Organization* <b>Trager Practitioners/Certified Snr Trager Practitioner</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43202</b>		M D Y <b>0 2 2 3 1 7</b>		Amount <b>\$50.00</b>
Full Name of Contributor <b>Donald Shartzter</b>						Registration Number, if PAC			
Street Address <b>587 Royal Forest Blvd</b>			Employer/Occupation/Labor Organization* <b>Franklin County Public Defender/Lawyer</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43214</b>		M D Y <b>0 2 2 4 1 7</b>		Amount <b>\$250.00</b>
Full Name of Contributor <b>Gayle Channing Tenebaum</b>						Registration Number, if PAC			
Street Address <b>164 North Harding Road</b>			Employer/Occupation/Labor Organization* <b>Retired</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43209</b>		M D Y <b>0 2 2 4 1 7</b>		Amount <b>\$100.00</b>
Full Name of Contributor <b>Martin Kellog</b>						Registration Number, if PAC			
Street Address <b>2582 Summit St</b>			Employer/Occupation/Labor Organization* <b>Nationwide Insurance/IT App. Developer</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43202</b>		M D Y <b>0 2 2 5 1 7</b>		Amount <b>\$250.00</b>
Full Name of Contributor <b>Will Petrik</b>						Registration Number, if PAC			
Street Address <b>211 Clinton St</b>			Employer/Occupation/Labor Organization* <b>Local Matters/Grant Writer</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43202</b>		M D Y <b>0 3 0 7 1 7</b>		Amount <b>\$900.00</b>
Full Name of Contributor <b>Rebecca Petrik</b>						Registration Number, if PAC			
Street Address <b>417 24th St NW</b>			Employer/Occupation/Labor Organization* <b>Minot State University/Professor</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Minot</b>			State <b>ND</b>		Zip Code <b>58703</b>		M D Y <b>0 3 0 2 1 7</b>		Amount <b>\$1,500.00</b>
Full Name of Contributor <b>John Petrik</b>						Registration Number, if PAC			
Street Address <b>417 24th St NW</b>			Employer/Occupation/Labor Organization* <b>JMAC Corporate Services LLC/General Counsel</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Minot</b>			State <b>ND</b>		Zip Code <b>58703</b>		M D Y <b>0 3 0 7 1 7</b>		Amount <b>\$1,000.00</b>
Full Name of Contributor <b>Joanne Wissler</b>						Registration Number, if PAC			
Street Address <b>159 Amazon Place</b>			Employer/Occupation/Labor Organization* <b>Retired</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>			State <b>OH</b>		Zip Code <b>43214</b>		M D Y <b>0 3 0 2 1 7</b>		Amount <b>\$400.00</b>

\* 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)]

Page Total **\$4,450.00**