

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Jolley</b>									
Full Name of Contributor <b>Jay Taneja</b>						Registration Number, if PAC			
Street Address <b>1141 Colusa Avenue</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Credit Card</b>		
City <b>Berkeley</b>	State <b>C</b>	A <b>A</b>	Zip Code <b>94707</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>10.00</b>		
Full Name of Contributor <b>James H. Jolley</b>						Registration Number, if PAC			
Street Address <b>8715 Bayport Drive</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Centerville</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>45458</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>25.00</b>		
Full Name of Contributor <b>L. Ronald Polster</b>						Registration Number, if PAC			
Street Address <b>300 Revere Road</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Credit Card</b>		
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43213</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>25.00</b>		
Full Name of Contributor <b>The Shoemaker Company, Keith Shoemaker</b>						Registration Number, if PAC			
Street Address <b>100 South 3rd Street, Suite 111</b>			Employer/Occupation/Labor Organization* <b>The Shoemaker Company</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>5</b>	Y <b>1</b>	Amount <b>100.00</b>		
Full Name of Contributor <b>Jady L. Johnson</b>						Registration Number, if PAC			
Street Address <b>844 Crestway Drive</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>5</b>	Y <b>1</b>	Amount <b>100.00</b>		
Full Name of Contributor <b>Troy J. Doucet, Esq.</b>						Registration Number, if PAC			
Street Address <b>4200 Regent Street, Suite 200</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>43219</b>	M <b>0</b>	D <b>5</b>	Y <b>2</b>	Amount <b>50.00</b>		
Full Name of Contributor <b>Nita L. Wilson</b>						Registration Number, if PAC			
Street Address <b>1104 Blithe Road</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Springfield</b>	State <b>O</b>	H <b>H</b>	Zip Code <b>45503</b>	M <b>0</b>	D <b>5</b>	Y <b>2</b>	Amount <b>25.00</b>		
Full Name of Contributor <b>Lori JB O'Bryan</b>						Registration Number, if PAC			
Street Address <b>1010 Elk Run Road</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Silverthorn</b>	State <b>C</b>	O <b>O</b>	Zip Code <b>80498</b>	M <b>0</b>	D <b>5</b>	Y <b>2</b>	Amount <b>50.00</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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ **385.00**