

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Renew the Blendon Township Police Levy									
Full Name of Contributor Phillip Cromwell						Registration Number, if PAC			
Street Address 497 River Pebble Drive			Employer/Occupation/Labor Organization* Blendon Township Police Sgt.				Form (Cash, Check, etc.) cash		
City Blacklick		State OH	Zip Code 43004		M 0	D 3	Y 2	Y 1	Amount \$40.00
Full Name of Contributor Dustin Lephart						Registration Number, if PAC			
Street Address 4509 Big Walnutview Drive			Employer/Occupation/Labor Organization* Blendon Township Police Lt.				Form (Cash, Check, etc.) cash		
City Gahanna		State OH	Zip Code 43230		M 0	D 3	Y 2	Y 1	Amount \$60.00
Full Name of Contributor Allana Barnhart						Registration Number, if PAC			
Street Address 3136 Peel Road			Employer/Occupation/Labor Organization* Blendon Township Admin. Assistant				Form (Cash, Check, etc.) cash		
City Radnor		State OH	Zip Code 43066		M 0	D 3	Y 2	Y 1	Amount \$30.00
Full Name of Contributor Luke Rees						Registration Number, if PAC			
Street Address 2943 Culver Drive			Employer/Occupation/Labor Organization* Blendon Township Police Officer				Form (Cash, Check, etc.) cash		
City Hilliard		State OH	Zip Code 43026		M 0	D 3	Y 2	Y 1	Amount \$30.00
Full Name of Contributor Ruth Roese						Registration Number, if PAC			
Street Address 975 South Hempstead Road			Employer/Occupation/Labor Organization* Blendon Township Admin. Assistant				Form (Cash, Check, etc.) cash		
City Westerville		State OH	Zip Code 43081		M 0	D 3	Y 2	Y 1	Amount \$30.00
Full Name of Contributor Jan Heichel						Registration Number, if PAC			
Street Address 5576 Santiago Drive			Employer/Occupation/Labor Organization* Blendon Township Trustee				Form (Cash, Check, etc.) check		
City Westerville		State OH	Zip Code 43081		M 0	D 3	Y 2	Y 0	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	Y	Amount
		OH							
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	Y	Amount
		OH							

* 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 **\$290.00**