

## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Berry for Grove City							
Full Name of Contributor Rocky Black					Registration Number, if PAC		
Street Address 2152 Birch Bark Trl		Employer/Occupation/Labor Organization* State Of Ohio			Form (Cash, Check, etc.) check		
City Grove City	State O   H	Zip Code 43123	M 0   9	D 0   8	Y 1   3	Amount 125.00	
Full Name of Contributor Karin Cash					Registration Number, if PAC		
Street Address 5432 Grove City Road		Employer/Occupation/Labor Organization* Blue Moon Even Center			Form (Cash, Check, etc.) check		
City Grove City	State O   H	Zip Code 43123	M 0   9	D 1   0	Y 1   3	Amount 140.00	
Full Name of Contributor Steve Bennett					Registration Number, if PAC		
Street Address 1806 Hawthorn Parkway		Employer/Occupation/Labor Organization* Self Employed			Form (Cash, Check, etc.) check		
City Grove City	State O   H	Zip Code 43123	M 0   9	D 1   6	Y 1   3	Amount 50.00	
Full Name of Contributor Grove City Area Republican Club					Registration Number, if PAC		
Street Address 5580 Meadow Grove Drive		Employer/Occupation/Labor Organization* Local Political Party			Form (Cash, Check, etc.) check		
City Grove City	State O   H	Zip Code 43123	M 1   0	D 0   3	Y 1   3	Amount 200.00	
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		
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	

\* 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 \$ 515.00