| 31-  | A   |   |   |   |
|------|-----|---|---|---|
| R.C. | 351 | 7 | 1 | ſ |

## **Statement of Contributions Received**

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|------|------|
| Page | <br> |

Prescribed by Scoretary of State 03/05

| Name of Committee in Full Committee To Elect Jarvis |               | <del></del>  | · · · · · · · · · · · · · · · · · · · |                             |                                   |                          |  |
|---|---------------|--|---------------------------------------|-----------------------------|-----------------------------------|--------------------------|--|
| Full Name of Contributor Robert Wood                |               |  | Registra                              | ation Nur                   | nber, if Pa                       | AC                       |  |
| Street Address<br>35 N. High Street                 |               | Employer/Occupation/Labor Organization* Private Resident |                                       |                             | Form (Cash, Check, etc.)<br>check |                          |  |
| City<br>Canal Winchester                            | State<br>OH   | Zip Code<br>43110  | 1 M                                   | D <sub>j</sub>              | 1 5                               | Amount<br>\$300.00       |  |
| Full Name of Contributor                            |               |  | Registr                               | Registration Number, if PAC |                                   |                          |  |
| Street Address                                      | Employer/Occu | Employer/Occupation/Labor Organization                   |                                       |                             | Form (Cash, Check, etc.)          |                          |  |
| City  | State<br>OH   | Zip Code   | M                                     | D                           | Y                                 | Amount                   |  |
| Full Name of Contributor                            |               |  |                                       | Registration Number, if PAC |                                   |                          |  |
| Street Address                                      | Employer/Occu | pation/Labor Organization*                               |                                       |                             | Form (Cash, Check, etc.)          |                          |  |
| City  | State<br>OH   | Zip Code   | M                                     | D                           | Y                                 | Amount                   |  |
| Full Name of Contributor                            | <u> </u>      |  | Registr                               | ation Nu                    | nber, if P                        | AC                       |  |
| Street Address                                      | Employer/Occu | pation/Labor Organization*                               | <u> </u>                              |                             |                                   | Form (Cash, Check, etc.) |  |
| City  | State<br>OH   | Zip Code   | M                                     | D                           | Y                                 | Amount                   |  |
| Full Name of Contributor                            |               |  | Registr                               | Registration Number, if PAC |                                   |                          |  |
| Street Address                                      | Employer/Occa | pation/Labor Organization*                               |                                       | Form (Cash                  |                                   |                          |  |
| City  | State<br>OH   | Zip Code   | М                                     | D                           | Y                                 | Amount                   |  |
| Full Name of Contributor Registration               |               |  |                                       | ation Nu                    | n Number, if PAC                  |                          |  |
| Street Address                                      | Employer/Occu | pation/Labor Organization*                               | <b>_</b>                              |                             | Form (Cash, Check, etc.)          |                          |  |
| City  | State<br>OH   | Zip Code   | M                                     | D                           | Y                                 | Amount                   |  |
| Full Name of Contributor                            |               |  | Registr                               | ation Nu                    | mber, if P                        | AC                       |  |
| Street Address                                      | Employer/Occa | pation/Labor Organization*                               | <b></b>                               |                             |                                   | Form (Cash, Check, etc.) |  |
| City  | State<br>OH   | Zip Code   | M                                     | D                           | Y                                 | Amount                   |  |
| Full Name of Contributor                            | <u> </u>      |  | Registr                               | ation Nu                    | mber, if P                        | AC                       |  |
| Street Address                                      | Employer/Occi | upation/Labor Organization*                              |                                       | ····                        |                                   | Form (Cash, Check, etc.) |  |
| City  | State<br>OH   | Zip Code   | M                                     | D                           | Y                                 | Amount                   |  |

Page Total \$300.00

<sup>\*</sup> 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)]