

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for a Safer Madison Township						
Full Name of Contributor Bluestar Inc., Shade on the Canal					Registration Number, if PAC	
Street Address 19 S. High St.		Employer/Occupation/Labor Organization* Private Business			Form (Cash, Check, etc.) Check	
City Canal Winchester	State OH	Zip Code 43110	M 0	D 4	Y 0815	Amount \$125.00
Full Name of Contributor Michael Miller					Registration Number, if PAC	
Street Address 146 Washington St		Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Cash	
City Canal Winchester	State OH	Zip Code 43110	M 0	D 4	Y 0815	Amount \$50.00
Full Name of Contributor Hunter, Camahan, Shoub & Byard					Registration Number, if PAC	
Street Address 3360 Tremont Rd., 2nd Floor		Employer/Occupation/Labor Organization* Legal Firm			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 4	Y 0915	Amount \$100.00
Full Name of Contributor Hersh Packing					Registration Number, if PAC	
Street Address 312 N. High St.		Employer/Occupation/Labor Organization* Industrial			Form (Cash, Check, etc.) Check	
City Canal Winchester	State OH	Zip Code 43110	M 0	D 4	Y 1515	Amount \$50.00
Full Name of Contributor Joshua Ruetsch					Registration Number, if PAC	
Street Address 6706 Hawthorne Dr.		Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Check	
City Plain City	State OH	Zip Code 43064	M 0	D 4	Y 1515	Amount \$50.00
Full Name of Contributor Harry Sutphen					Registration Number, if PAC	
Street Address 780 S. Friendship Dr.		Employer/Occupation/Labor Organization* CEO Sutphen			Form (Cash, Check, etc.) Check	
City New Concord	State OH	Zip Code 43762	M 0	D 4	Y 2115	Amount \$100.00
Full Name of Contributor Vantrust Real Estate, LLC					Registration Number, if PAC	
Street Address 4520 Main Street, Suite 1000		Employer/Occupation/Labor Organization* Real Estate			Form (Cash, Check, etc.) Check	
City Kansas City	State MO	Zip Code 64111	M 0	D 5	Y 0515	Amount \$100.00
Full Name of Contributor Mark Ballenger					Registration Number, if PAC	
Street Address 6353 Clearport Rd. NW		Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Check	
City Lancaster	State OH	Zip Code 43130	M 0	D 5	Y 0515	Amount \$50.00

* 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)]