

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>CITIZENS FOR HAUGHN</b>						
Full Name of Contributor <b>NANCY CARTER</b>					Registration Number, if PAC	
Street Address <b>2712 SUANN AVE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>TONI VANHORN STEPHENSON</b>					Registration Number, if PAC	
Street Address <b>17960 STATE ROUTE 104</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>CIRCLEVILLE</b>	State <b>OH</b>	Zip Code <b>43113</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>REGINA L EVANS</b>					Registration Number, if PAC	
Street Address <b>2167 PRESLEY DR</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>MICHAEL LINDER</b>					Registration Number, if PAC	
Street Address <b>5300 MEADOW GROVE DR</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>8</b>	Y <b>3</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>SHEROL SAXTON MULLIGAN</b>					Registration Number, if PAC	
Street Address <b>3110 ESCOTT ST</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>MARIAN M. BRECKENRIDGE</b>					Registration Number, if PAC	
Street Address <b>3892 ORCHARD LANE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>DENNIS A. HAUGHN</b>					Registration Number, if PAC	
Street Address <b>3897 ORCHARD LANE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>8</b>	Y <b>3</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>SHARON L. DOWNS</b>					Registration Number, if PAC	
Street Address <b>4747 GROVE CITY RD</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>\$100.00</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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$625.00**