

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens For Grandviews Future									
Full Name of Contributor Susan M. Jagers						Registration Number, if PAC			
Street Address 1543 Wyandotte Road			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Columbus		State OH		Zip Code 43212		M 0		D 4	
						Y 0		Amount \$50.00	
Full Name of Contributor Patrik G. Bowman						Registration Number, if PAC			
Street Address 4050 Glenmont Place			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Columbus		State OH		Zip Code 43214		M 0		D 4	
						Y 1		Amount \$150.00	
Full Name of Contributor Fraternal Order of Police						Registration Number, if PAC			
Street Address 6800 Schrock Hill Court			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Columbus		State OH		Zip Code 43229		M 0		D 5	
						Y 0		Amount \$500.00	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)		
City		State OH		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 OH		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 OH		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 OH		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 OH		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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$700.00**