Statement of Contributions Received



Prescribed by Secretary of State 03/05

Name of Committee in Full				
Citizens for Hawk				
Full Name of Contributor Franklin County Republican Party			Registration Number, if P.	AC
Street Address	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.)
14 E Gay St	0		1 1 2 1 2	Check
City Columbus	State OH	Zip Code 43215	1 0 2 6 1 2	\$50,000.00
Full Name of Contributor Registration Number, if PA				AC
Steve Faulkner				
Street Address 115 N Huron Ave	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.) EFT
City	State	Zip Code	M D Y 1 2	Amount \$100.00
Columbus	ОН	43204		\$100.00
Ill Name of Contributor Kelvin Ferguson Registration Number, if I				AC
Street Address 4513 Lakeside St	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.) EFT
City Columbus	State OH	Zip Code 43232 1	$\begin{array}{c c} M \\ 1 & 0 & 3 & 0 & 1 \\ \end{array}$	Amount \$50.00
Full Name of Contributor			Registration Number, if P	AC
Edward Pauline				
Street Address 1495 W 6th Ave	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.) EFT
City Columbus	State OH	Zip Code 43212	1 0 3 0 1 2	Amount \$50.00
Full Name of Contributor Dan LeVesque Registration Number, if PAC				
Street Address	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.)
4179 Ashgrove Dr				EFT
City Grove City	State OH	Zip Code 43123	1 0 3 0 1 2	Amount \$10.00
Full Name of Contributor	;	1	Registration Number, if F	PAC
Ronald Younkin				
Street Address 555 Greenlawn Ave	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.) Check
City	State	Zip Code	M D Y 1 1 2	Amount
Columbus	ОН	43223	<u> </u>	\$500.00
Full Name of Contributor SMD HLS Bonding Co LLC; c/o John Fox				AC
Street Address	Employer/Occup	ation/Labor Organization		Form (Cash, Check, etc.)
571 S High St				Check
City Columbus	State OH	Zip Code 43215	M D Y 1 0 3 1 1 2	Amount \$500.00
Full Name of Contributor Registration Number, if P. CP401				AC
Street Address 200 E Town St	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	1 0 3 1 1 2	Amount \$1,000.00

Page Total \$52,210.00

^{*} 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)]