Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full			
Name of Committee in Full Aluttofor Dublin			
Full Name of Contributor		Registration Numb	er, if PAC
Joseph Alutto			
Street Address	Employer/Occupation/Labor Or	ganization*	Form (Cash, Check, etc.)
810 Curleys Ct	Retired		Check
City	State Zip Code	M D	Y Amount
Columbus	o h 4323	5 1 0 0 3	1 9 250.00
Full Name of Contributor		Registration Numb	
Carol Newcomb			
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
810 Curleys Ct	Retired		Check
City	State Zip Code	M D	Y Amount
Columbus	o h 4323		
Full Name of Contributor		Registration Numb	er,#PAC
John Reiner	Int. 10		Form (Cook Charleste)
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
8977 Turin Hill Ct. N.	State Zip Code	MID	Check Y Amount
City	l l	M D	
Dublin Full Name of Contributor	o h 4301	7 1 0 0 1 Registration Numb	
		registration numb	or, as AC
Michael Gunnarson Street Address	Employer/Occupation/Labor Or	reanization*	Form (Cash, Check, etc.)
6028 Ernest Way	Realtor		Check
City City	State Zip Code	M D	Y Amount
Dublin	0 h 4301	1 1	
Full Name of Contributor	1 0 1 1 1001	Registration Numb	
Street Address	Employer/Occupation/Labor Organization* For		Form (Cash, Check, etc.)
City	State Zip Code	M D	Y Amount
Full Name of Contributor		Registration Numb	per, if PAC
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State Zip Code	M	Y Amount
		6	or FDAC
Full Name of Contributor		Registration Number	er, ii PAC
6	Employee /Occupation/Labor O	brownization*	Form (Cash, Check, etc.)
Street Address	Employer/Occupation/Labor Organization*		i orini (Cast, Circle, Cic.)
Chr.	State Zip Code	MD	Y Amount
City	State Zpcode		
Full Name of Contributor		Registration Num	ber, if PAC
1 GE I TOUR OF COME BOARD			
Street Address	Employer/Occupation/Labor O	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)	
City	State Zip Code	M D	Y Amount
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* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$	1,000.00