

FOR PAPER FILING ONLY

Statement of Contributions Received

Page 1

Prescribed by Secretary of State 03/05

Name of Committee in Full Central Ohio Restaurant Association Political Action Committee							
Full Name of Contributor Scott Heimlich						Registration Number, if PAC	
Street Address 1474 Linwood Ave.			Employer/Occupation/Labor Organization* Restaurant Owner			Form (Cash, Check, etc.) Check # 1972	
City Columbus		State OH	Zip Code 43206	M 0	D 8	Y 1 1 0 9	Amount \$500.00
Full Name of Contributor Gail Baker						Registration Number, if PAC	
Street Address 259 Garfield Ave.			Employer/Occupation/Labor Organization* Association Executive			Form (Cash, Check, etc.) Check # 4820	
City London		State OH	Zip Code 43140	M 0	D 8	Y 1 1 0 9	Amount \$125.00
Full Name of Contributor Bruce H. Burkholder, WBBB, PAC						Registration Number, if PAC CP-1058	
Street Address 300 Spruce Street			Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check # 1689	
City Columbus		State OH	Zip Code 43215	M 0	D 8	Y 1 1 0 9	Amount \$500.00
Full Name of Contributor Thomas Hart, WBBB, PAC						Registration Number, if PAC CP-1058	
Street Address 300 Spruce Street			Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check # 1688	
City Columbus		State OH	Zip Code 43215	M 0	D 8	Y 1 1 0 9	Amount \$500.00
Full Name of Contributor The Old Bag of Nails/Pig Iron/Chubby's, LLC						Registration Number, if PAC	
Street Address 1331 Walcutt Road			Employer/Occupation/Labor Organization* Restaurant Owner			Form (Cash, Check, etc.) Check#90125	
City Columbus		State OH	Zip Code 43228	M 0	D 8	Y 1 0 0 9	Amount \$1,000.00
Full Name of Contributor Breads of the World, LLC						Registration Number, if PAC	
Street Address 2433 South Hanley Road			Employer/Occupation/Labor Organization* Restaurant Owner			Form (Cash, Check, etc.) Check#88484	
City St. Louis		State MO	Zip Code 63144	M 0	D 8	Y 2 4 0 9	Amount \$1,000.00
Full Name of Contributor Daniel Ponton						Registration Number, if PAC	
Street Address 6140 Dublin Road			Employer/Occupation/Labor Organization* Restaurant Owner			Form (Cash, Check, etc.) Check # 1842	
City Dublin		State OH	Zip Code 43017	M 0	D 8	Y 1 1 0 9	Amount \$500.00
Full Name of Contributor Craig Barnum						Registration Number, if PAC	
Street Address 5463 Heathrow Drive			Employer/Occupation/Labor Organization* Restaurant Owner			Form (Cash, Check, etc.) Check # 2147	
City Powell		State OH	Zip Code 43065	M 0	D 8	Y 1 1 0 9	Amount \$500.00

* 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)]

Page Total **\$4,625.00**