

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Elect Bud Zappitelli Trustee							
Full Name of Contributor Bud Zappitelli						Registration Number, if PAC	
Street Address 7558 Schleppi Rd		Employer/Occupation/Labor Organization* Zappitelli Financial				Form (Cash, Check, etc.) Check	
City New Albany		State OH	Zip Code 43054	M 1	D 0	Y 0	Amount \$500.00
Full Name of Contributor Bud Zappitelli						Registration Number, if PAC	
Street Address 7558 Schleppi Rd		Employer/Occupation/Labor Organization* Zappitelli Financial				Form (Cash, Check, etc.) check	
City New Albany		State OH	Zip Code 43054	M 1	D 0	Y 1	Amount \$738.96
Full Name of Contributor Frank and Kelley Harmon						Registration Number, if PAC	
Street Address 8120 Corporate Boulevard		Employer/Occupation/Labor Organization* OHIO INSURANCE SERVICES AGENCY, INC.				Form (Cash, Check, etc.) Check	
City Plain City		State OH	Zip Code 43064	M 1	D 0	Y 1	Amount \$150.00
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 **\$1,388.96**