

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full LEVYFACTS.COM							
Full Name of Contributor SUSAN MENTRAK					Registration Number, if PAC		
Street Address 250 STORINGTON RD		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CARD		
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 6	Y 1 1	Amount 9.00	
Full Name of Contributor PAUL MOORE					Registration Number, if PAC		
Street Address 603 VALLEY WOOD CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CARD		
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 6	Y 1 1	Amount 50.00	
Full Name of Contributor RODERICK CLAY					Registration Number, if PAC		
Street Address 433 MARY AVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 6	Y 1 1	Amount 390.00	
Full Name of Contributor GREGORY PLUTCHAK					Registration Number, if PAC		
Street Address 564 HACKBERRY DR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 8	Y 1 1	Amount 100.00	
Full Name of Contributor SUE KING					Registration Number, if PAC		
Street Address 2548 HOME ACRE DR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43231	M 1 0	D 0 8	Y 1 1	Amount 25.00	
Full Name of Contributor JAMES HARRISON					Registration Number, if PAC		
Street Address 7160 JACQUELINE CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43082	M 1 0	D 0 8	Y 1 1	Amount 50.00	
Full Name of Contributor JM VAN FLEET					Registration Number, if PAC		
Street Address 1206 WEDGEWOOD TERRACE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43082	M 1 0	D 0 8	Y 1 1	Amount 50.00	
Full Name of Contributor GERRY WYSCARVER					Registration Number, if PAC		
Street Address 6253 LANGTON CIR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 8	Y 1 1	Amount 20.00	

* 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 appear. [R.C. 3517.10(B)(4)]