

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Vote Schadek							
Full Name of Contributor William Kuykendall					Registration Number, if PAC		
Street Address 1580 Guilford Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Electronic Pay		
City Columbus	State O H	Zip Code 43221	M 1	D 0	Y 6	Amount 96.80	
Full Name of Contributor Carolyn Weeks					Registration Number, if PAC		
Street Address 1926 Beverly Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Electronic Pay		
City Columbus	State O H	Zip Code 43221	M 1	D 0	Y 6	Amount 23.97	
Full Name of Contributor James Fronk					Registration Number, if PAC		
Street Address 2134 Oakmount Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Electronic Pay		
City Upper Arlington	State O H	Zip Code 43221	M 1	D 0	Y 6	Amount 28.83	
Full Name of Contributor Jim Mild					Registration Number, if PAC		
Street Address 6659 Hayhurst Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Electronic Pay		
City Worthington	State O H	Zip Code 43085	M 1	D 0	Y 6	Amount 242.45	
Full Name of Contributor Louis Hoyer					Registration Number, if PAC		
Street Address 609 Davenport Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Electronic Pay		
City Gahanna	State O H	Zip Code 43230	M 1	D 0	Y 6	Amount 23.97	
Full Name of Contributor Rex Holman					Registration Number, if PAC		
Street Address 6516 Cedar Brook Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Electronic Pay		
City New Albany	State O H	Zip Code 43054	M 1	D 0	Y 6	Amount 48.25	
Full Name of Contributor Adam Burton					Registration Number, if PAC		
Street Address 2529 Northwest Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Electronic Pay		
City Columbus	State O H	Zip Code 43221	M 1	D 0	Y 6	Amount 48.25	
Full Name of Contributor Jason Graves					Registration Number, if PAC		
Street Address 1529 Guilford Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Electronic Pay		
City Columbus	State O H	Zip Code 43221	M 1	D 0	Y 6	Amount 242.45	

* 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 \$ 754.97