## **Statement of Contributions Received**

Page 1

Prescribed by Secretary of State 03/05

N				
Name of Committee in Full Committee for Crysta Pennington			·	
Full Name of Contributor Helena Bush			Registration Number, if F	'AC
Street Address 144 West Ticonderoga Drive; Apt "F"	Employer/Occu	apation/Labor Organization*		Form (Cash, Check, etc.) check
City Westerville	State OH	Zip Code 43081	M D Y Y D 1 6	Amount \$200.00
Full Name of Contributor  Janice M. Flowers			Registration Number, if F	AC
Street Address 4449 Easton Way; 2nd Floor	Employer/Ocer	ipation/Labor Organization		Form (Cash, Check, etc.)
City Columbus	State OH	Zip Code 43219	M D Y	Amount \$40.00
Full Name of Contributor Paul E. Morrison	<u> </u>		Registration Number, if PAC	
Street Address 1001 Esther Drive	Employer/Occu	ipation/Labor Organization		Form (Cash, Check, etc.)
City Columbus	State OH	Zip Code 43207	0 1 0 6 1 6	Amount \$40.00
Full Name of Contributor Stephen Wolfe			Registration Number, if I	AC
Street Address 1247 Forsythe Avenue	Employer/Occs	upation/Labor Organization®		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43201	M D Y	Amount \$150.00
Full Name of Contributor Katherine Keenan Wolfe	<u>-</u>		Registration Number, if I	AC
Street Address 1247 Forsythe Avenue	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43201	0 1 1 1 1 6	Amount \$150.00
Full Name of Contributor Cecily L. Ferris Registration Number, if PAC				
Street Address 601 South High Street	Employer/Occo	upation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	M D N D 1 N D 1 N D D 1 2 3 1 6	Amount \$100.00
Full Name of Contributor Joyce Clark	-		Registration Number, if PAC	
Street Address 1790 Bide-A-Wee Park	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.) check
City Columbus	Stagle OH	Zip Code 43205	M D Y O 1 6 1 6	Amount \$100.00
Full Name of Contributor  Catherine White			Registration Number, if I	AC
Street Address 145 East Livingston Avenue	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)
City Columbus	State OH	Zip Code 43215	0 1 2 8 1 6	Amount \$100.00

Page Total \$880.00

<sup>\*</sup> 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)]