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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full									
Keck for Council					Registration Number, if PAC				
Full Name of Contributor				Registrati	OH THING	01, 11 1 1 1 0			
Connie J. Newman	Employer		I.			ank ato)			
Street Address	1 7				Form (Cash, Check, etc.)				
698 Hathaway Trail		Re/Max, Dayton				37	Check		
City	Sta		Zip Code	M	D	8	Amount	1 000 00	
Tipp City		H	45371	0 2	0 7	0 9		1,000.00	
Full Name of Contributor				Registrat	ion Numb	er, if PAC	٥		
Boyd Ball									
Street Address	1 ' '	Employer/Occupation/Labor Organization*					Form (Cash, C	neck, etc.)	
1696 19th Ave	BJB	BJB Computers					EFT		
City	Sta	te	Zip Code	М	D	Y	Amount		
San Francisco		A	94122	0 3	0 8			100.00	
Full Name of Contributor									
Bob Armstrong									
Street Address	F	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) EFT		
4322 Hickory Wood Dr	Ohi	Ohio State University							
City	Sta	te	Zip Code	M	D	Y	Amount		
Columbus	01	H	43228	0 3	1 6	0 9		25.00	
Full Name of Contributor				Registrat	ion Numl	ber, if PA	С		
Chuck Buck									
Street Address	Employer/Occupation/Labor Organization*				507 Text of the control of the contr		Form (Cash, C	heck, etc.)	
4814 Canterwood Ct	Buck and Sons						Check		
City		State Zip Code			D	Y	Amount		
Hilliard	01	H	43026	0 3	1 8	0 9		300.00	
Full Name of Contributor						ber, if PA	.C		
Bill Newman									
Street Address	Employe	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
624 Crumbaugh	1 ' '	UI Products						Check	
City		State Zip Code			D	Y	Amount	***************************************	
		Н	40324	0 3	1 8	0 9		1,000.00	
Georgetown Full Name of Contributor		. S. A.	1 100	accessed and a superior of the		ber, if PA			
Ted Barrows									
Street Address	Employe	Employer/Occupation/Labor Organization*				iniberanoperano <u>peraniper(14))</u>	Form (Cash, Check, etc.)		
	1 1 1	Judge, Franklin County N					Check		
4834 Sarasota Dr		ate	Zip Code	T M	D	Y	Amount		
City			43026	0/3	1	0 9		100.00	
Hilliard		3. 3.	TOULU			ber, if PA		200100	
Full Name of Contributor									
Kenneth J. Keck	Employe	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
Street Address	1 1 1				!			Check	
2824 Kingston Ave		University of Dayton State Zip Code			D	ΙΥ	Amount		
City			1 '	$\begin{bmatrix} M \\ 0 \end{bmatrix} 3$	1		1	50.00	
Dayton		O H 45420				ber, if P	THE RESIDENCE OF THE PARTY OF T	30.00	
Full Name of Contributor				Registra	ation inuli	ioei, II F	10		
Heather Keck Form (Cash C							Thack etc.)		
Street Address	1 ' "	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
3400 Heritage Oaks Dr		Owner, Super Suppers					EFT		
City		ate	Zip Code	M	D	Y	Amount	4E0 00	
Hilliard		H	43026	0 3	1 8	DESCRIPTION OF THE PROPERTY OF	name of the	450.00	

Page Total \$ 3,025.00

^{*} 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)]