

Event Date	12/12/06
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Dewey Stokes					
Full Name of Contributor Cloppert, Latanick, Sauter, Washburn				Registration Number, if PAC	
Street Address 225 East Broad St.		Employer/Occupation/Labor Organization*		M D Y 1 2 1 2 0 6	Amount 50.00
City Columbus		State O H	Zip Code 43215	Form(Cash,Check,etc) Check	
Full Name of Contributor					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		M D Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)	
Full Name of Contributor					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		M D Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)	
Full Name of Contributor					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		M D Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)	
Full Name of Contributor					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		M D Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)	
Full Name of Contributor					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		M D Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)	
Full Name of Contributor					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		M D Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)	