

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Brett Sciotto</b>							
Full Name of Contributor <b>Kelly Godshall</b>					Registration Number, if PAC		
Street Address <b>4608 Tuttle Road</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Dublin</b>	State <b>O H</b>	Zip Code <b>43017</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Committee for Jim Hughes</b>					Registration Number, if PAC		
Street Address <b>52 E. Gay Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>O H</b>	Zip Code <b>43215</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>150.00</b>	
Full Name of Contributor <b>Erin Mayne</b>					Registration Number, if PAC		
Street Address <b>3220 Scioto Run Blvd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Hilliard</b>	State <b>O H</b>	Zip Code <b>43026</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>8 online contributions of \$25.00</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>online contribution</b>		
City	State	Zip Code	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>200.00</b>	
Full Name of Contributor <b>Anne Weiant</b>					Registration Number, if PAC		
Street Address <b>3636 Cemetery Road</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>online contribution</b>		
City <b>Hilliard</b>	State <b>O H</b>	Zip Code <b>43026</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Drew Hall</b>					Registration Number, if PAC		
Street Address <b>1691 W Par Court</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>online contribution</b>		
City <b>Eagle</b>	State <b>I D</b>	Zip Code <b>83616</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Doug Kennedy</b>					Registration Number, if PAC		
Street Address <b>155 East Broad Street - 12th Floor</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>O H</b>	Zip Code <b>43215</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Charlie Smith</b>					Registration Number, if PAC		
Street Address <b>155 East Broad Street - 12th Floor</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>O H</b>	Zip Code <b>43215</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>100.00</b>	

\* 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 \$ **850.00**