

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full LEVYFACTS.COM							
Full Name of Contributor SUSAN MENTRAK						Registration Number, if PAC	
Street Address 250 STORINGTON RD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CARD	
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 6	Y 1 1	Amount 9.00	
Full Name of Contributor PAUL MOORE						Registration Number, if PAC	
Street Address 603 VALLEY WOOD CT			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CARD	
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 6	Y 1 1	Amount 50.00	
Full Name of Contributor RODERICK CLAY						Registration Number, if PAC	
Street Address 433 MARY AVE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 6	Y 1 1	Amount 390.00	
Full Name of Contributor GREGORY PLUTCHAK						Registration Number, if PAC	
Street Address 564 HACKBERRY DR			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 8	Y 1 1	Amount 100.00	
Full Name of Contributor SUE KING						Registration Number, if PAC	
Street Address 2548 HOME ACRE DR			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O H	Zip Code 43281	M 1 0	D 0 8	Y 1 1	Amount 25.00	
Full Name of Contributor JAMES HARRISON						Registration Number, if PAC	
Street Address 7160 JACQUELINE CT			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City WESTERVILLE	State O H	Zip Code 43082	M 1 0	D 0 8	Y 1 1	Amount 50.00	
Full Name of Contributor JM VAN FLEET						Registration Number, if PAC	
Street Address 1206 WEDGEWOOD TERRACE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City WESTERVILLE	State O H	Zip Code 43082	M 1 0	D 0 8	Y 1 1	Amount 50.00	
Full Name of Contributor GERRY WYSCARVER						Registration Number, if PAC	
Street Address 6253 LANGTON CIR			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City WESTERVILLE	State O H	Zip Code 43081	M 1 0	D 0 8	Y 1 1	Amount 20.00	

* 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)]

Page Total \$ **694.00**