

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Crysta Pennington							
Full Name of Contributor Dewey A. Ortiz					Registration Number, if PAC		
Street Address P.O. Box 13314		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43213	M 0	D 2	Y 2	Amount \$500.00	
Full Name of Contributor Thomas Waldeck					Registration Number, if PAC		
Street Address 1027 Peggys Cove		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH <input checked="" type="checkbox"/>	Zip Code 43068	M 0	D 2	Y 2	Amount \$50.00	
Full Name of Contributor Katherine Wolfe					Registration Number, if PAC		
Street Address 1247 Forsythe Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43201	M 0	D 2	Y 2	Amount \$100.00	
Full Name of Contributor Stephen Wolfe					Registration Number, if PAC		
Street Address 1247 Forsythe Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43201	M 0	D 2	Y 2	Amount \$100.00	
Full Name of Contributor Mary C. Woods					Registration Number, if PAC		
Street Address 1022 Blind Brook Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43235	M 0	D 2	Y 2	Amount \$100.00	
Full Name of Contributor Toki M. Clark					Registration Number, if PAC		
Street Address 341 South 3rd Street; Suite 201		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43215	M 0	D 3	Y 1	Amount \$100.00	
Full Name of Contributor Kurt Pennington					Registration Number, if PAC		
Street Address 4631 Sylvan Oak Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Trotwood	State OH <input checked="" type="checkbox"/>	Zip Code 45426	M 0	D 4	Y 0	Amount \$30.00	
Full Name of Contributor Robert Pennington					Registration Number, if PAC		
Street Address 4762 Pinnacle Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Miamisburg	State OH <input checked="" type="checkbox"/>	Zip Code 45342	M 0	D 4	Y 0	Amount \$30.00	

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$1,010.00**