

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Leeseberg							
Full Name of Contributor Fundraiser - held 04/13/17					Registration Number, if PAC		
Street Address 81 Mill Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Gahanna	State O H	Zip Code 43230	M 0 4	D 1 3	Y 1 7	Amount 1,300.00	
Full Name of Contributor Donald Stoffer					Registration Number, if PAC		
Street Address 1136 Beechview Dr N		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 0 4	D 1 8	Y 1 7	Amount 50.00	
Full Name of Contributor Drew Geiman					Registration Number, if PAC		
Street Address 8184 Crete Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Blacklick	State O H	Zip Code 43004	M 0 4	D 1 8	Y 1 7	Amount 40.00	
Full Name of Contributor James & Kara Graham					Registration Number, if PAC		
Street Address 703 Tim Tam		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 4	D 2 2	Y 1 7	Amount 50.00	
Full Name of Contributor Smith & Hale LLC, 100% Glen Dugger					Registration Number, if PAC		
Street Address 37 West Broad St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 4	D 2 5	Y 1 7	Amount 100.00	
Full Name of Contributor Smith & Hale LLC, 100% Jeffrey Brown					Registration Number, if PAC		
Street Address 37 West Broad St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 4	D 2 5	Y 1 7	Amount 50.00	
Full Name of Contributor Greg Lewis					Registration Number, if PAC		
Street Address 625 City Park Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 0 5	D 0 1	Y 1 7	Amount 100.00	
Full Name of Contributor Lee Bailey					Registration Number, if PAC		
Street Address 647 Churchill Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 5	D 0 9	Y 1 7	Amount 50.00	

* 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 \$ 1,740.00