

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Hawk									
Full Name of Contributor Briscoe Law Office, LPA; c/o Collen Briscoe							Registration Number, if PAC		
Street Address 400 S Fifth St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43215		M 0 D 6 Y 0		Amount \$150.00	
Full Name of Contributor David Martin							Registration Number, if PAC		
Street Address 6031 Wilton House Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City New Albany		State OH		Zip Code 43054		M 0 D 6 Y 0		Amount \$150.00	
Full Name of Contributor Nicholas Roger							Registration Number, if PAC		
Street Address 16 Wiveliscombe			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City New Albany		State OH		Zip Code 43054		M 0 D 6 Y 2		Amount \$150.00	
Full Name of Contributor Sharon Reichard							Registration Number, if PAC		
Street Address 2427 Marthas Wood			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) EFT		
City Grove City		State OH		Zip Code 43123		M 0 D 8 Y 0		Amount \$200.00	
Full Name of Contributor Nathan Milam							Registration Number, if PAC		
Street Address 6144 Buckeye Pkwy			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) EFT		
City Grove City		State OH		Zip Code 43123		M 0 D 8 Y 0		Amount \$25.00	
Full Name of Contributor Kathy McNeal							Registration Number, if PAC		
Street Address 7775 Harrisburg London Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) EFT		
City Orient		State OH		Zip Code 43146		M 0 D 8 Y 0		Amount \$25.00	
Full Name of Contributor Richard Sommer							Registration Number, if PAC		
Street Address 4231 Demorest Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) EFT		
City Grove City		State OH		Zip Code 43123		M 0 D 8 Y 0		Amount \$25.00	
Full Name of Contributor Kathryn Ogden							Registration Number, if PAC		
Street Address 5964 Landings Pond Pl			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) EFT		
City Grove City		State OH		Zip Code 43123		M 0 D 8 Y 0		Amount \$100.00	

* 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 **\$825.00**