

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>COMMITTEE FOR THE 2014 COLUMBUS ZOO LEVY</b>							
Full Name of Contributor <b>CORNA • KOKOSING</b>						Registration Number, if PAC	
Street Address <b>6235 WESTERVILLE ROAD</b>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>WESTERVILLE</b>		State <b>OH</b>	Zip Code <b>43081</b>	M <b>0</b>	D <b>4</b>	Y <b>2</b>	Amount <b>\$5,000.00</b>
Full Name of Contributor <b>ARENA MOTOR SALES LLC</b>						Registration Number, if PAC	
Street Address <b>PO BOX 8429</b>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43201</b>	M <b>0</b>	D <b>4</b>	Y <b>2</b>	Amount <b>\$1,000.00</b>
Full Name of Contributor <b>FIFTH THIRD BANK</b>						Registration Number, if PAC	
Street Address <b>250 WEST MAIN STREET SUITE 100</b>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>LEXINGTON</b>		State <b>KY</b>	Zip Code <b>40507</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>\$15,000.00</b>
Full Name of Contributor <b>SQUIRE SANDERS (US) LLP</b>						Registration Number, if PAC	
Street Address <b>41 S High St #2000</b>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>\$1,000.00</b>
Full Name of Contributor <b>LOUIS R. POLSTER</b>						Registration Number, if PAC	
Street Address <b>PO BOX 2016</b>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43216</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>\$1,500.00</b>
Full Name of Contributor <b>MESSER CONSTRUCTION</b>						Registration Number, if PAC	
Street Address <b>5158 FISHWICK DRIVE</b>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>CINCINNATI</b>		State <b>OH</b>	Zip Code <b>45216</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>\$10,000.00</b>
Full Name of Contributor <b>MOMENTIVE SPECIALTY CHEMICALS</b>						Registration Number, if PAC	
Street Address <b>180 EAST BROAD STREET</b>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>\$10,000.00</b>
Full Name of Contributor <b>HUMACARE, INC.</b>						Registration Number, if PAC	
Street Address <b>9501 UNION CEMETERY ROAD</b>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>	
City <b>LOVELAND</b>		State <b>OH</b>	Zip Code <b>45140</b>	M <b>0</b>	D <b>5</b>	Y <b>0</b>	Amount <b>\$25,000.00</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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$68,500.00**