

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Keeler, Longbrake, Lynaugh for Grandview Heights							
Full Name of Contributor Sheila Ross					Registration Number, if PAC		
Street Address 1168 Onway Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43228	M 0	D 8	Y 3 1 1 5	Amount 25.00	
Full Name of Contributor David Schmied					Registration Number, if PAC		
Street Address 1451 Haines Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grandview Heights	State O H	Zip Code 43212	M 0	D 8	Y 3 1 1 5	Amount 50.00	
Full Name of Contributor Richard Swanson					Registration Number, if PAC		
Street Address 1215 Parkway North		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0	D 8	Y 3 1 1 5	Amount 40.00	
Full Name of Contributor Brenton Temple					Registration Number, if PAC		
Street Address 1000 Urlin Ave. Apt 2007		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grandview Heights	State O H	Zip Code 43212	M 0	D 8	Y 3 1 1 5	Amount 50.00	
Full Name of Contributor Jonathan Varner					Registration Number, if PAC		
Street Address 2427 Cambridge Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43212	M 0	D 8	Y 3 1 1 5	Amount 100.00	
Full Name of Contributor Phillip Wenzel					Registration Number, if PAC		
Street Address 9323 Din Eidyn Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0	D 8	Y 3 1 1 5	Amount 50.00	
Full Name of Contributor Alex Wenzel					Registration Number, if PAC		
Street Address 4466 S. Pearl St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Englewood	State C O	Zip Code 80113	M 0	D 8	Y 3 1 1 5	Amount 48.62	
Full Name of Contributor Melvin Windley					Registration Number, if PAC		
Street Address 3888 Charter Oak Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43219	M 0	D 8	Y 3 1 1 5	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 463.62