

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <u>Committee To Elect Karen Dover For SIVCS Board</u>							
Full Name of Contributor <u>Jim Hale</u>					Registration Number, if PAC		
Street Address <u>4215 Arbutus Ave</u>		Employer/Occupation/Labor Organization* <u>Grove City Ex Dir. DCVCB</u>			Form (Cash, Check, etc.) <u>CASH</u>		
City <u>Grove City</u>	State <u>Oh.</u>	Zip Code <u>43123</u>	M <u>08</u>	D <u>31</u>	Y <u>09</u>	Amount <u>50.00</u>	
Full Name of Contributor <u>GARY L. CURRY</u>					Registration Number, if PAC		
Street Address <u>2424 GRANDA CT.</u>		Employer/Occupation/Labor Organization* <u>Self Employed / machine shop</u>			Form (Cash, Check, etc.) <u>CK. 5830</u>		
City <u>Galloway, Ohio</u>	State <u>Oh.</u>	Zip Code <u>43119</u>	M <u>09</u>	D <u>15</u>	Y <u>09</u>	Amount <u>2,000.00</u>	
Full Name of Contributor <u>Alice Sweekey</u>					Registration Number, if PAC		
Street Address <u>3816 Lake Cumberland Way</u>		Employer/Occupation/Labor Organization* <u>Retired Teacher / SIVCS</u>			Form (Cash, Check, etc.) <u>CK. 5867</u>		
City <u>Grove City</u>	State <u>Oh.</u>	Zip Code <u>43123</u>	M <u>09</u>	D <u>18</u>	Y <u>09</u>	Amount <u>50.00</u>	
Full Name of Contributor <u>Ted Berry</u>					Registration Number, if PAC		
Street Address <u>1311 Summer Glen Dr.</u>		Employer/Occupation/Labor Organization* <u>Development Director, OSU</u>			Form (Cash, Check, etc.) <u>CK. 226</u>		
City <u>Grove City</u>	State <u>Oh.</u>	Zip Code <u>43123</u>	M <u>10</u>	D <u>03</u>	Y <u>09</u>	Amount <u>250.00</u>	
Full Name of Contributor <u>MARY EVERSMAN</u>					Registration Number, if PAC		
Street Address <u>2471 Zuber Rd.</u>		Employer/Occupation/Labor Organization* <u>Administrative Secretary, FC children</u>			Form (Cash, Check, etc.) <u>CK. 749</u>		
City <u>Grove City</u>	State <u>Oh.</u>	Zip Code <u>43123</u>	M <u>10</u>	D <u>04</u>	Y <u>09</u>	Amount <u>100.00</u>	
Full Name of Contributor <u>REYNA WATSON</u>					Registration Number, if PAC		
Street Address <u>5353 Thornhill Ct.</u>		Employer/Occupation/Labor Organization* <u>Insurance Co.</u>			Form (Cash, Check, etc.) <u>CK. 2264</u>		
City <u>Grove City</u>	State <u>Oh.</u>	Zip Code <u>43123</u>	M <u>10</u>	D <u>10</u>	Y <u>09</u>	Amount <u>100.00</u>	
Full Name of Contributor <u>B. J. Roach</u>					Registration Number, if PAC		
Street Address <u>2426 Holton Rd.</u>		Employer/Occupation/Labor Organization* <u>Self Employed, Real Estate</u>			Form (Cash, Check, etc.) <u>CK. 2264</u>		
City <u>Grove City</u>	State <u>Oh.</u>	Zip Code <u>43123</u>	M <u>10</u>	D <u>16</u>	Y <u>09</u>	Amount <u>200.00</u>	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

\* 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 \$ 2,700.00