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## **Statement of Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full Wolfe For Mayor Committee				y y de la companya d		
Full Name of Contributor Stephen P Campbell			Registration	n Number, if PA	AC	
Street Address 8430 Lazelle Village Dr	Employer/Occa	apation/Labor Organization*			Form (Cash, Check, etc.) ck	
City Lewis Center	State OH	Zip Code 43035	0 <sup>M</sup> 4 2	<sup>D</sup> 2 0 9	Amount \$300.00	
Full Name of Contributor <b>Harold H Mohr</b>			Registration	n Number, if P	AC	
Street Address  336 Harbor View Dr	Employer/Occi	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City Thornville	State OH	Zip Code <b>43076</b>	0 <sup>M</sup> 5 0	D 1 0 9	Amount \$1,000.00	
Full Name of Contributor Roger Simons			Registration	n Number, if Pa	AC	
Street Address 12575 Wheaton Ave	Employer/Occi	Beerre	Form (Cash, Check, etc			
City <b>Pickerington</b>	State OH	Zip Code <b>43147</b>		D 5 0 9	Amount <b>\$100.00</b>	
Full Name of Contributor Gregory Comfort			Registratio	n Number, if Pa	AC	
Street Address 2275 Onadaga Dr	Employer/Occupation/Labor Organization*		Contraction of the Contraction o		Form (Cash, Check, etc.)	
City Cols	State OH	Zip Code <b>43221</b>	0 <sup>M</sup> 5 0	7 0 9	Amount <b>\$500.00</b>	
Full Name of Contributor Francis Scott Drlik			Registratio	n Number, if Pa	AC	
Street Address 1022 Briarview Ave NW	Employer/Occi	upation/Labor Organization*	Acquirement of the second of t		Form (Cash, Check, etc.)	
<sup>City</sup> N Canton	State OH	Zip Code <b>44720</b>		5 0 9	Amount <b>\$100.00</b>	
Full Name of Contributor Philip Allen			Registratio	n Number, if P	AC	
Street Address 371 Cumberland Dr	Employer/Occi	upation/Labor Organization*			Form (Cash, Check, etc.)	
<sup>City</sup> <b>Whitehall</b>	State OH	Zip Code <b>43213</b>	0 <sup>M</sup> 5 0	0 8 0 9	Amount <b>\$200.00</b>	
JUNAME OF CONTRIBUTOR  Judith Meloy				Registration Number, if PAC		
Street Address 7276 Poppy Hill Ct	Employer/Occ			Form (Cash, Check, etc.)		
City Blacklick	State OH	Zip Code <b>43004</b>	0 5 1		Amount \$100.00	
Full Name of Contributor  Daniel T Burdick			Registratio	on Number, if P.	AC	
Street Address 5740 Frederick Pk	Employer/Occ	upation/Labor Organization*			Form (Cash, Check, etc.)	
City  Dayton	State OH	Zip Code 45414	0 5	D Y 1 3 0 9	Amount \$100.00	

<sup>\*</sup> 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)]