

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Columbus Community Bill of Rights PAC									
Full Name of Contributor Amy Mathews						Registration Number, if PAC			
Street Address 452 Lewis Ave NW			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal		
City New Philadelphia		State OH	Zip Code 44663		M 0	D 4	Y 2	Y 8	Amount \$67.67
Full Name of Contributor Joe Motil						Registration Number, if PAC			
Street Address 167 West Cooke Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal		
City Columbus		State OH	Zip Code 43214		M 0	D 4	Y 2	Y 8	Amount \$48.25
Full Name of Contributor Kaylee Johnson						Registration Number, if PAC			
Street Address 3495 Pontius Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Uniontown		State OH	Zip Code 44605		M 0	D 4	Y 2	Y 9	Amount \$70.00
Full Name of Contributor Greg Pace						Registration Number, if PAC			
Street Address 3485 Indianola Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus		State OH	Zip Code 43214		M 0	D 5	Y 1	Y 1	Amount \$100.00
Full Name of Contributor Tim Samaniego						Registration Number, if PAC			
Street Address 19930 Boundry Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Cridersville		State OH	Zip Code 45806		M 0	D 6	Y 2	Y 4	Amount \$25.00
Full Name of Contributor Bill Lyons						Registration Number, if PAC			
Street Address 245 Walhalla Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Columbus		State OH	Zip Code 43202		M 0	D 6	Y 2	Y 4	Amount \$20.00
Full Name of Contributor Kathy McGlone						Registration Number, if PAC			
Street Address 4754 Widner Court			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Columbus		State OH	Zip Code 43220		M 0	D 6	Y 2	Y 4	Amount \$20.00
Full Name of Contributor Sandy Bolzenius						Registration Number, if PAC			
Street Address 88 W. Blake Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Columbus		State OH	Zip Code 43202		M 0	D 6	Y 2	Y 4	Amount \$25.00

* 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)]