

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Jenifer French																		
Full Name of Contributor Cheryl Christy							Registration Number, if PAC											
Street Address 8933 Creek View Street				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash											
City Canal Winchester				State OH		Zip Code 43110		<table border="1"> <tr> <td>M</td><td>D</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>1</td> </tr> <tr> <td>2</td><td>1</td><td>3</td> </tr> </table>		M	D	Y	0	7	1	2	1	3
M	D	Y																
0	7	1																
2	1	3																
							Amount \$100.00											
Full Name of Contributor Bruce Bryant							Registration Number, if PAC											
Street Address 953 Woodsedge Lane				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check											
City Westerville				State OH		Zip Code 43081		<table border="1"> <tr> <td>M</td><td>D</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>2</td> </tr> <tr> <td>1</td><td>1</td><td>3</td> </tr> </table>		M	D	Y	0	7	2	1	1	3
M	D	Y																
0	7	2																
1	1	3																
							Amount \$100.00											
Full Name of Contributor Pamela B. Myers							Registration Number, if PAC											
Street Address 964 Woodsedge Lane				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check											
City Westerville				State OH		Zip Code 43081		<table border="1"> <tr> <td>M</td><td>D</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>2</td> </tr> <tr> <td>0</td><td>1</td><td>3</td> </tr> </table>		M	D	Y	0	7	2	0	1	3
M	D	Y																
0	7	2																
0	1	3																
							Amount \$50.00											
Full Name of Contributor Kelly Cook							Registration Number, if PAC											
Street Address 315 Hampton Park North				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check											
City Westerville				State OH		Zip Code 43081		<table border="1"> <tr> <td>M</td><td>D</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>2</td> </tr> <tr> <td>0</td><td>1</td><td>3</td> </tr> </table>		M	D	Y	0	7	2	0	1	3
M	D	Y																
0	7	2																
0	1	3																
							Amount \$100.00											
Full Name of Contributor Marilyn Crabel							Registration Number, if PAC											
Street Address 72 Spring Creek Drive				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash											
City Westerville				State OH		Zip Code 43081		<table border="1"> <tr> <td>M</td><td>D</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>2</td> </tr> <tr> <td>1</td><td>1</td><td>3</td> </tr> </table>		M	D	Y	0	7	2	1	1	3
M	D	Y																
0	7	2																
1	1	3																
							Amount \$25.00											
Full Name of Contributor Citizens for Anne Gonzales							Registration Number, if PAC											
Street Address 865 Macon Alley				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check											
City Columbus				State OH		Zip Code 43206		<table border="1"> <tr> <td>M</td><td>D</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>1</td> </tr> <tr> <td>8</td><td>1</td><td>3</td> </tr> </table>		M	D	Y	0	7	1	8	1	3
M	D	Y																
0	7	1																
8	1	3																
							Amount \$250.00											
Full Name of Contributor Susan S. Gooshall							Registration Number, if PAC											
Street Address 942 Woodsedge Lane				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check											
City Westerville				State OH		Zip Code 43081		<table border="1"> <tr> <td>M</td><td>D</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>2</td> </tr> <tr> <td>8</td><td>1</td><td>3</td> </tr> </table>		M	D	Y	0	7	2	8	1	3
M	D	Y																
0	7	2																
8	1	3																
							Amount \$25.00											
Full Name of Contributor Timothy H. Reed							Registration Number, if PAC											
Street Address 1045 Autumn Meadows Drive				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check											
City Westerville				State OH		Zip Code 43081		<table border="1"> <tr> <td>M</td><td>D</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>2</td> </tr> <tr> <td>3</td><td>1</td><td>3</td> </tr> </table>		M	D	Y	0	7	2	3	1	3
M	D	Y																
0	7	2																
3	1	3																
							Amount \$50.00											

* 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)]