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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full			** ***				
Walter4Dublin Full Name of Contributor				In		1 'EDA	
				Registra	mon Num	ber, if PA	C
William Bownas	le v						
Street Address	Employer/	Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
7365 Bellaire Ave			T		_	<del>,</del>	Check
City	Stat		Zip Code	M	D	Y	Amount
Dublin	0	H	43017		1 3		200.00
Full Name of Contributor				Registra	tion Num	ıber, if PA	С
Brendan Kelly						_	
Street Address	Employer/	Оссира	ntion/Labor Organization*				Form (Cash, Check, etc.)
111 W 1st Ave, Apt 12	<u> </u>					_	Credit Card
City	Stat		Zip Code	М	Ð	Y	Amount
Columbus	01	Η	43201	0 8	1 4	1 5	25.00
Full Name of Contributor				Registra	tion Num	iber, if PA	С
Daniel Walter							
Street Address	Employer/	Оссира	ntion/Labor Organization*	-			Form (Cash, Check, etc.)
738 Decker Road							Credit Card
City	Stat	e	Zip Code	М	D	Y	Amount
Georgia	VI	.1.	05468	018	212	1 5	50.00
Full Name of Contributor				-		ber, if PA	С
Michelle Thomas							
Street Address	Employer/	Оссира	tion/Labor Organization*	•			Form (Cash, Check, etc.)
6321 Ross Bend							Check
City	Stat	e	Zip Code	М	D	Y	Amount
Dublin	OI	H·	43016	lots	218	1 5	150.00
Full Name of Contributor			10010		_	ber, if PA	
Cap Clegg						•	
Street Address	Employer/	Оссива	tion/Labor Organization*				Form (Cash, Check, etc.)
5334 McGinty Ct	` ´	•					Check
City	Stat	c	Zip Code	М	D	Y	Amount
Dublin	OI	H	43017	1 '	019		100.00
Full Name of Contributor			43017				
Full Name of Contributor Registration Number, if PAC  Mark Dewalt							
Street Address	Employer/	Occuma	tion/Labor Organization*	<u> </u>		1	Form (Cash, Check, etc.)
8851 Sunart Ct	,,						Check
City	State	_	Zip Code	М	D	Y	Amount
Dublin Dublin		H	43017			1 5	
Full Name of Contributor	<u> </u>		45017			ber, if PA	
Timothy Spencer				Registra	alou ivan	oci, ii i n	C
Street Address	TE-molos		ution/Labor Organization*			1	Form (Cash, Check, etc.)
•	стрюуст	Coccupa	ukartang Organization				
8094 Holyrood Ct		_	2:- C-1-	1 14	I B	LV	Check
City	State	с Н	Zip Code	M	D	Y	Amount
Dublin	0	11	43017			1 6	50.00
Full Name of Contributor Registration Number, if PAC							
Charles Marlowe							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
8490 Torwoodlee Ct			2. 0 1	T 1/		1 32	Check
City	Stat		Zip Code	M	D	Y	Amount
Dublin	0	Н	43017	<u> 1019</u>	1 1	1   5	250.00

\* 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 \$	925.00