

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Support LaCorte Campaign							
Full Name of Contributor Tim H Cooper						Registration Number, if PAC	
Street Address 884-County Line Rd				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	M	D	Y	Amount 250.00	
Full Name of Contributor Paul Snyder						Registration Number, if PAC	
Street Address Talcon Ct				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43081	M	D	Y	Amount 50.00	
Full Name of Contributor Mike and Anna Sbrochi						Registration Number, if PAC	
Street Address 10415 Upper Lake Circle				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43082	M	D	Y	Amount 50.00	
Full Name of Contributor Carl and Pauline LaCorte						Registration Number, if PAC	
Street Address 1748 Alpine Dr				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43229	M	D	Y	Amount 25.00	
Full Name of Contributor Jackie Ashton						Registration Number, if PAC	
Street Address 3895 Henderson Rd				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M	D	Y	Amount 50.00	
Full Name of Contributor Chelsea Wright						Registration Number, if PAC	
Street Address 5066 Etna Rd				Employer/Occupation/Labor Organization* N/A		Form (Cash, Check, etc.) Check	
City Whitehall, Ohio	State OH	Zip Code 43213	M	D	Y	Amount 200.00	
Full Name of Contributor Leslie LaCorte						Registration Number, if PAC	
Street Address 5066 Etna Rd				Employer/Occupation/Labor Organization* N/A		Form (Cash, Check, etc.) Credit	
City Whitehall	State OH	Zip Code 43213	M	D	Y	Amount 300.00	
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 \$ **1325.00**
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