

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for a Better Reynoldsburg</b>							
Full Name of Contributor <b>Charles Unterreiner</b>					Registration Number, if PAC		
Street Address <b>Wynstone Dr</b>		Employer/Occupation/Labor Organization* <b>Retired</b>			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Lewis Center</b>	State <b>O</b>   <b>H</b>	Zip Code <b>43035</b>	M <b>1</b>   <b>1</b>	D <b>0</b>   <b>8</b>	Y <b>1</b>   <b>1</b>	Amount <b>500.00</b>	
Full Name of Contributor <b>PNC Bank</b>					Registration Number, if PAC		
Street Address <b>1900 E Ninth St</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Cleveland</b>	State <b>O</b>   <b>H</b>	Zip Code <b>44114</b>	M <b>1</b>   <b>1</b>	D <b>0</b>   <b>8</b>	Y <b>1</b>   <b>1</b>	Amount <b>250.00</b>	
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	
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	
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	
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	
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	
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))