

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Walter4Dublin									
Full Name of Contributor Lloyd Casey						Registration Number, if PAC			
Street Address 7976 Jaymes Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0 6	D 1 4	Y 1 1	Amount 20.00			
Full Name of Contributor Cynthia Humphry						Registration Number, if PAC			
Street Address 8074 Summerhouse Drive West			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43016	M 0 6	D 3 0	Y 1 1	Amount 80.00			
Full Name of Contributor Mark Mace						Registration Number, if PAC			
Street Address 6469 Green Stone Loop			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal		
City Dublin	State O H	Zip Code 43016	M 0 6	D 3 0	Y 1 1	Amount 50.00			
Full Name of Contributor Christine Saneholtz						Registration Number, if PAC			
Street Address 5626 Loch Broom Circle			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal		
City Dublin	State O H	Zip Code 43017	M 0 6	D 3 0	Y 1 1	Amount 100.00			
Full Name of Contributor Harry Gard						Registration Number, if PAC			
Street Address 195 Waterford Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal		
City Dublin	State O H	Zip Code 43017	M 0 6	D 3 0	Y 1 1	Amount 5.00			
Full Name of Contributor Mitchell Grant						Registration Number, if PAC			
Street Address 5075 Galway Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal		
City Dublin	State O H	Zip Code 43017	M 0 7	D 0 1	Y 1 1	Amount 50.00			
Full Name of Contributor Debbie Korcykoski						Registration Number, if PAC			
Street Address 8026 Summerhouse Drive West			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43016	M 0 7	D 0 1	Y 1 1	Amount 80.00			
Full Name of Contributor John Molnar						Registration Number, if PAC			
Street Address 6434 Red Stone Loop			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43016	M 0 7	D 0 2	Y 1 1	Amount 80.00			

* 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)]