

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full COMMITTEE TO RENEW BLENDON TWP POLICE LEVY							
Full Name of Contributor GREG BOGGS					Registration Number, if PAC		
Street Address 9097 INDEPENDENCE AVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City ORIENT	State OH	Zip Code 43216	M 1	D 0	Y 0	Amount \$100.00	
Full Name of Contributor JOHN C BELFORD					Registration Number, if PAC		
Street Address 4856 PLEASANT WOODS CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City GAHANNA	State OH	Zip Code 43230	M 1	D 0	Y 0	Amount \$100.00	
Full Name of Contributor JOSHUA RETHERFORD					Registration Number, if PAC		
Street Address 6255 JOHNSTOWN RD		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City MT. VERNON	State OH	Zip Code 43050	M 1	D 0	Y 0	Amount \$50.00	
Full Name of Contributor THOMAS BARNETT					Registration Number, if PAC		
Street Address 1791 FAIRWOOD AVENUE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State OH	Zip Code 43207	M 1	D 0	Y 0	Amount \$300.00	
Full Name of Contributor ERIC MOORE					Registration Number, if PAC		
Street Address 7516 ROLLING RIDGE WAY		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State OH	Zip Code 43082	M 1	D 0	Y 1	Amount \$50.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State OH	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 OH	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 OH	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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$600.00**