Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full		-						
··	tio=		,					
Citizens for Gahanna Parks and Recr	eation			Regist	ration N	umbe	r, if I	PAC
Street Address	Employer	r/Occup	pation/Labor Organization*	<u> </u>		* · · <u>·</u>		Form (Cash, Check, etc.)
City	Sta	ite	Zip Code	М	D		Y	Amount
Full Name of Contributor	<u> </u>		<u></u>	Regist	ration N	umbe	r, if P	AC
Street Address	Employer	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
City	Sta	ite	Zip Code	М	D		Y	Amount
Full Name of Contributor				Regist	ration N	umbe	r, if P	AC
Street Address	Employer	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
City	Stat	te	Zip Code	M	D		Y	Amount
Full Name of Contributor	 -			Regist	ation N	ımbeı	, if P	AC
Street Address	Employer	Employer/Occupation/Labor Organization*			-			Form (Cash, Check, etc.)
City	Stat	te	Zip Code	M	D		Y	Amount
Full Name of Contributor				Registr	ation N	ımbe	, if P	AC
Street Address	Employer	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
City	Stat	te	Zip Code	М	D		Y	Amount
Full Name of Contributor				Registr	ation Ni	ımber	, if P	AC
Street Address	Employer	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
City	Stat	te	Zip Code	M	D		Y	Amount
Full Name of Contributor				Registr	ation Nu	ımber	, if P	AC
Street Address	Employer	imployer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
City	Stat	te	Zip Code	M	D		Y	Amount
Full Name of Contributor			· — · · · · · · · · · · · · · · · · · ·	Registr	ation Nu	mber	, if Pa	AC
Street Address	Employer/	Employer/Occupation/Labor Organization*			•			Form (Cash, Check, etc.)
City	State	ie	Zip Code	М	D		r	Amount
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* 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 \$	0.00