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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full				201					
Committee for Cindy Lazarus									
Full Name of Contributor	Registration Number, if PAC					С			
Jeffrey R. Lyttle									
Street Address	Employer	r/Occupat	tion/Labor Organization*				Form (Cash, Che	ck, etc.)	
192 Tucker Drive							Check		
City	Sta	nte	Zip Code	M	D	Y	Amount		
Worthington	0	Н	43085	0 1	2 5	0 8		250.00	
Full Name of Contributor Registration Number, if PAC									
Catherine M. Lyttle				1					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
192 Tucker Drive							Check		
City	Sta	ate	Zip Code	М	D	Y	Amount		
Worthington	0	Н	43085	0 1	2 5	0 8		250.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	С		
Sandra L. Neely									
Street Address	Employe	r/Occupa	tion/Labor Organization*				Form (Cash, Che	ck, etc.)	
4931 Meadway Drive	l						Check		
City	Sta	ate	Zip Code	М	D	Y	Amount		
New Albany	0	H	43054	$0 \mid 1$	2 5	0 8		250.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	.C		
Elizabeth B. Crane				i					
Street Address	Employe	т/Оссира	tion/Labor Organization*				Form (Cash, Che	eck, etc.)	
279 Columbia Ave.							Check		
City	Sta	ate	Zip Code	M	D	Y	Amount		
Columbus	0	Н	43209	0 1	2 8	0 8		1,000.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	.C		
Catherine Adams									
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
729 Mohawk Street	l						Check		
City	St	ate	Zip Code	M	D	Y	Amount		
Columbus	0	Н	43206	0 1	3 1	0 8		250.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	vC		
Connie Argus				l					
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)			
155 W. Main Street							check		
City	St	ate	Zip Code	M	D	Y	Amount		
Columbus	0	H	43215		3 1			250.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	IC		
Beth A. Wymer									
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)					
2044 Fairfax Road	İ						check		
City	St	ate	Zip Code	М	D	Y	Amount		
Columbus	0	H	43221	0 1	3 1			250.00	
Full Name of Contributor Registration Number, if PAC									
Brian J. Ellis									
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)					
7789 Silver Lake Court				Check					
City	St	ate	Zip Code	M	D	Y	Amount		
Columbus	0	H	43082	0 1	3 1	0 8	<u> </u>	250.00	

* 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)]

Page Total \$	2	,750.	00_