## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full											
Schottke Loe GC											
Full Name of Contributor	<del></del>		Regis	strati	on Nur	nber, i	f PA	c			
Koby Schollke											
Name of Committee in Full Schottke for 6C  Full Name of Contributor  Koby Schottke  Street Address  49/2 Mc Nulty St.  City Grove City  Full Name of Committee in Full  Edit Name of Committee in Full  Full Name of Committee	Employer/Occupati	on/Labor Organization*						Form (Cash, Check, etc.)  Leck			
GROVE CITY	State OH	Zip Code 43123	A	1	\$ 2	3 1 Y	7	Amount 200,00			
Full Name of Contributor Registration Number, if PAC											
Street Address	Employer/Occupati						Form (Cash, Check, etc.)				
City	State	Zip Code	М		D	Y		Amount			
Full Name of Contributor	Registration Number, if PAC										
Street Address	Employer/Occupati	ion/Labor Organization*	<b>L</b>					Form (Cash, Check, etc.)			
City	State	Zip Code	М		D	Y		Amount			
Full Name of Contributor			Regi	strati	on Nu	mber,	f PA	C			
Street Address	Employer/Occupati						Form (Cash, Check, etc.)				
City	State	Zip Code	М		D	Y		Amount			
Full Name of Contributor						Registration Number, if PAC					
Street Address	Employer/Occupat	ion/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							if P/	NC .			
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)			
City	State	Zip Code	M		D	Y		Amount			

Page Total \$

<sup>\*</sup> 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)]