

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Columbus Community Bill of Rights PAC							
Full Name of Contributor William Lyons					Registration Number, if PAC		
Street Address 245 Walhalla Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Columbus	State O H	Zip Code 43202	M 0	D 7	Y 1	Amount 50.00	
Full Name of Contributor Robert Krasen					Registration Number, if PAC		
Street Address 566 Blenheim Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Columbus	State O H	Zip Code 43214	M 0	D 7	Y 1	Amount 30.00	
Full Name of Contributor Charlotte Owens					Registration Number, if PAC		
Street Address 77 E. Columbus St., Apt. A		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Lithopolis	State O H	Zip Code 43136	M 0	D 7	Y 1	Amount 25.00	
Full Name of Contributor Annerose Schiffrin					Registration Number, if PAC		
Street Address 2832 Maryland Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Bexley	State O H	Zip Code 43209	M 0	D 7	Y 2	Amount 50.00	
Full Name of Contributor Robert Roehm					Registration Number, if PAC		
Street Address 2964 Northwest Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Columbus	State o h	Zip Code 43221	M 0	D 7	Y 2	Amount 30.00	
Full Name of Contributor Cathy Burkhart					Registration Number, if PAC		
Street Address 37615 Chestnut Ridge Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Barnesville	State o h	Zip Code 43713	M 0	D 7	Y 2	Amount 50.00	
Full Name of Contributor Erin Hess					Registration Number, if PAC		
Street Address 774 E. Tulane Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Columbus	State o h	Zip Code 43211	M 0	D 7	Y 2	Amount 30.00	
Full Name of Contributor Gregory Kilep					Registration Number, if PAC		
Street Address 53 E. Torrence Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Columbus	State o h	Zip Code 43214	M 0	D 7	Y 2	Amount 30.00	

* 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)]