

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Keep Council Open							
Full Name of Contributor Robert J. Fitrakis						Registration Number, if PAC	
Street Address 1021 E. Broad St.			Employer/Occupation/Labor Organization* Professor			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43205	M 0	D 9	Y 2	Amount \$20.00	
Full Name of Contributor Larry Moore						Registration Number, if PAC	
Street Address 17 Wilson Ave.			Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43205	M 0	D 9	Y 2	Amount \$60.00	
Full Name of Contributor Doral Chenoweth						Registration Number, if PAC	
Street Address 3066 Rightmire Blvd.			Employer/Occupation/Labor Organization* Writer			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 1	D 0	Y 2	Amount \$50.00	
Full Name of Contributor Michael Aaron						Registration Number, if PAC	
Street Address 1118 Lilley Rd.			Employer/Occupation/Labor Organization* Hospitality			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 1	D 0	Y 2	Amount \$40.00	
Full Name of Contributor Suzanne Patzer						Registration Number, if PAC	
Street Address 1021 E. Broad St.			Employer/Occupation/Labor Organization* Education administrator			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43205	M 1	D 1	Y 0	Amount \$15.00	
Full Name of Contributor Willis Brown						Registration Number, if PAC	
Street Address 164 N. Monroe Ave.			Employer/Occupation/Labor Organization* Teacher			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43203	M 0	D 9	Y 2	Amount \$5.00	
Full Name of Contributor Willis Brown						Registration Number, if PAC	
Street Address 164 Monroe Ave.			Employer/Occupation/Labor Organization* Teacher			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43203	M 1	D 0	Y 1	Amount \$40.00	
Full Name of Contributor Charles Robol						Registration Number, if PAC	
Street Address 431 W. 6th Ave.			Employer/Occupation/Labor Organization* Student			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43201	M 1	D 0	Y 1	Amount \$20.00	

\* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$250.00