Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full								
2016 Citizens for Blendon/Westerville Fire	Levy							
Full Name of Contributor Registration Number, if PA								
Baker & Hostetler LLP Ohio Political Action Committee				OH125				
Street Address	Employer/Occup	stion/Labor Organization	-			Form (Cash, Check, etc.)		
127 Public Square, Key Tower Suite 2000		v				Check		
City Cleveland	State OH	Zip Code 44114	м 0 2	D ₁	Y ₁	Amount \$1,000.00		
Full Name of Contributor Regist						AC .		
Carol J. Hribar								
Street Address	Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)		
2569 Open Bay Court						Check		
City	State	Zip Code	М	D,	Yj_	Amount		
Galena	OH	43021	02	p e	1 6	\$100.00		
Tell Name of Contributor Thomas C Ullom					Registration Number, if PAC			
Street Address	Employer/Occupy	ation/Labor Organization	-	-		Form (Cash, Check, etc.)		
323 Eastwood Avenue	, , , , , , , , , , , , , , , , , , , ,				Check			
City	State	Zip Code	M	D	Yį	Amount		
Westerville	ОН	43081	0 2	0 8	1 6	\$100.00		
Full Name of Contributor					nber, if P	AC		
Adam F. Maxwell								
Street Address	Employer/Occupa	stion/Labor Organization		'		Form (Cash, Check, etc.)		
61 Massey Drive						Check		
City	State	Zip Code	М 0 2	D 8	Y	Amount		
Westerville	OH	43081	<u> </u>	1	1 6	\$50.00		
Full Name of Contributor Registration Number, if PAC								
Trinity Health								
Street Address	Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)		
20555 Victor Parkway	 	Ta: a :			·	Check		
City Livonia	State MI	Zip Code 48152	0 2	2 2	1 6	Amount \$2,500.00		
	I IVII	40132	+	ļ I				
Full Name of Contributor Ohio Association of Professional Fire Fighter	nber, if P/	AC .						
Street Address	<u> </u>					Form (Cash, Check, etc.)		
140 E. Town Street Suite #1225	Employer/Occupation/Labor Organization			Check				
	- Court	Zip Code	1 57	1 6	1 0			
Columbus	OH	43215	0 ^M 2	D 2 2	1 6	\$1,500.00		
Full Name of Contributor				ז	<u>, , , , , , , , , , , , , , , , , , , </u>			
Full Name of Contributor Registration Westerville Professional Firefighters IAFF Local 3480								
Contract of the Contract of th						Form (Cash, Check, etc.)		
171 Brighton Road	Employer/Occupation/Labor Organization				Check			
City	State	Zip Code	M	D	Yi	Amount		
Columbus	OH	43202	02	22	16	\$347.15		
Full Name of Contributor Registration Number, if						AC		
Street Address	Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
City	State	Zip Code	M	D _.	Yį	Amount		
	ОН		'					

Page Total \$5,597.15

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)]