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Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full The Blendon Township Police Levy	Committee				
Full Name of Contributor Bryan E. Rhoads			Registration Number, if	PAC	
Street Address 192 S. Ludlow Street	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.) check	
City Cofumbus	State OH	Zip Code 43215	0 4 D 9 1 4	Amount \$100.00	
Full Name of Contributor Blair Nance			Registration Number, if	PAC	
Street Address 6079 Witherspoon Way	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.) check	
City Westerville	State OH	Zip Code 43081	0 4 0 9 1 4	Amount \$54.00	
Full Name of Committee Tammy Phillips	Registration Number, if PAC				
Street Address 7459 Bunker Ridge Court	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check	
City Blacklick	State OH	Zip Code 43004	M 1 D Y	Amount \$54.00	
Full Name of Contributor FOP Political Education Fund	Registration Number, if	PAC			
Street Address 6800 Schrock Hill Court	Employer/Occ	upation/Labor Organization		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43229	M D Y 0 4 1 4 1 4	Amount \$1,000.00	
Full Name of Contributor		•	Registration Number, if	PAC	
Street Address	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	M D Y	Amount	
Full Name of Contributor	Registration Number, if PAC				
Street Address	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	M D Y	Amount *	
Full Name of Contributor	Registration Number, if	PAC			
Street Address	Employer/Occ	cupation/Labor Organization		Form (Cash, Check, etc.)	
City	State OH	Zip Code	M D Y	Amount	
Full Name of Contributor	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Registration Number, if	PAC	
Street Address	Employer/Occ	Employer/Occupation/Labor Organization			
City	State OH	Zip Code	M D Y	Amount	

Page Total \$1,208.00

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)]