Statement of Contributions Received



Prescribed by Secretary of State 03/05

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Name of Committee in Full Consumter to Flect (mi Tran	1			
Full Name of Contributor			Registration Number, if	PAC	
Full Name of Contributor Elizabeth W. Gloven Street Address 4181 Mano Hore Count City Columbra Full Name of Contributor Contribu	Employer/Occup	nation/Labor Organization	— L	Form (Cash, Check, etc.)	
City Colubes	State	Zip Code 1 1/3° 2.20	M D 7 1	Amount 100,00	
Full Name of Contributor	- S	9/22/4 Registration Number, if PAC		PAC	
Street Address	Employer/Occup	pation/Labor Organization		Form (Cash, Check, etc.)	
City	State	Zip Code	09 2 2 1 1	Amount 825.42	
Full Name of Contributor	lame of Contributor			Registration Number, if PAC	
Street Address	Employer/Occup	pation/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/Occup	pation/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/Occu	pation/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/Occu	pation/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/Occu	pation/Labor Organization		Form (Cash, Check, etc.)	
City	State	Zip Code	M D Y	Amount	
Full Name of Contributor Registration Number,				PAC	
Street Address	Employer/Occu	pation/Labor Organization	<u> </u>	Form (Cash, Check, etc.)	
City	State	Zip Code	M D Y	Amount	

^{*} 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)]