

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full The Committee To Elect Eddie Pauline							
Full Name of Contributor Dan Heinlen					Registration Number, if PAC		
Street Address 2981 E. Powell Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Lewis Center	State O H	Zip Code	M 0 5	D 3 0	Y 0 5	Amount 50.00	
Full Name of Contributor Gregory Lashutka					Registration Number, if PAC		
Street Address 729 Mohawk Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 0 6	D 0 2	Y 0 5	Amount 250.00	
Full Name of Contributor Murphey Moore					Registration Number, if PAC		
Street Address 3300 Imani Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Charge		
City Columbus	State O H	Zip Code 43224	M 0 4	D 2 6	Y 0 5	Amount 50.00	
Full Name of Contributor Ryan Robinson					Registration Number, if PAC		
Street Address 4170 NW Pinecone Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Charge		
City Corvallis	State O R	Zip Code 07330	M 0 5	D 0 4	Y 0 5	Amount 50.00	
Full Name of Contributor Douglas Lance Jr.					Registration Number, if PAC		
Street Address 8521 Libra Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Charge		
City Dublin	State O H	Zip Code 43016	M 0 4	D 2 6	Y 0 5	Amount 100.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/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/Occupation/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/Occupation/Labor Organization*			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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ **500.00**