

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Boyd							
Full Name of Contributor Frank Reed					Registration Number, if PAC		
Street Address 10 W Broad St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 1	Amount \$100.00	
Full Name of Contributor Scott Alpeter					Registration Number, if PAC		
Street Address 1245 Lieutenant Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) EFT		
City Galloway	State OH	Zip Code 43119	M 1	D 0	Y 2	Amount \$500.00	
Full Name of Contributor Eric Grile					Registration Number, if PAC		
Street Address 3800 Municipal Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Hilliard	State OH	Zip Code 43026	M 1	D 0	Y 2	Amount \$50.00	
Full Name of Contributor John Francis					Registration Number, if PAC		
Street Address 905 Cove Point Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43228	M 1	D 0	Y 2	Amount \$50.00	
Full Name of Contributor Robert Fisher					Registration Number, if PAC		
Street Address 6475 Plain City Georgesville Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Plain City	State OH	Zip Code 43064	M 1	D 0	Y 2	Amount \$50.00	
Full Name of Contributor Steve Mazer					Registration Number, if PAC		
Street Address 3362 Harbor Bay Dr		Employer/Occupation/Labor Organization*			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 Mary Seidle					Registration Number, if PAC		
Street Address 4733 Clubpark Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	M 1	D 0	Y 2	Amount \$100.00	
Full Name of Contributor David Delande					Registration Number, if PAC		
Street Address 7747 Hayden Run Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	M 1	D 0	Y 2	Amount \$50.00	

* 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 **\$950.00**