

FOR PAPER FILING ONLY

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Full Name of Contributor PROS Consulting						Registration Number, if PAC	
Street Address 201 S. Capital Ave				Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)	
City Indianapolis		State OH IN	Zip Code 46225	M 04	D 19	Y 14	Amount 1,000.00
Full Name of Contributor Westerville Senior Association Inc						Registration Number, if PAC	
Street Address 764 Collingwood Dr				Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) check	
City Westerville		State OH	Zip Code 43081	M 07	D 29	Y 14	Amount 5,000.00
Full Name of Contributor Nationwide Children's Hospital						Registration Number, if PAC	
Street Address 700 Children's Drive				Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) check	
City Columbus		State OH	Zip Code 43205	M 06	D 06	Y 14	Amount 5,000.00
Full Name of Contributor POD, LLC						Registration Number, if PAC	
Street Address 100 Northwoods Blvd				Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)	
City Columbus		State OH	Zip Code 43235	M 07	D 31	Y 14	Amount 3,000.00
Full Name of Contributor Williams Associates Architects, Ltd						Registration Number, if PAC	
Street Address 500 Park Blvd				Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) check	
City Itasca		State IL	Zip Code 60143	M 06	D 28	Y 14	Amount 1,000.00
Full Name of Contributor Meyer + Associates Architecture						Registration Number, if PAC	
Street Address 232 N 3rd St #500				Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) check	
City Columbus		State OH	Zip Code 43215	M 04	D 26	Y 14	Amount 5,000.00
Full Name of Contributor Westerville Amateur Soccer Association						Registration Number, if PAC	
Street Address 2136 Tall Timbers Ct				Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) check	
City Columbus		State OH	Zip Code 43228	M 04	D 16	Y 14	Amount 10,000.00
Full Name of Contributor Westerville Youth Baseball Softball League						Registration Number, if PAC	
Street Address 6584 Hilmar Dr				Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)	
City Westerville		State OH	Zip Code 43081	M 09	D 02	Y 14	Amount 5000.00

* 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)]