

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Kathryn Hille for City Council									
Full Name of Contributor Kemba Financial Credit Union							Registration Number, if PAC		
Street Address 555 Officenter Place/PO Box 307370			Employer/Occupation/Labor Organization* interest earned on savings account balance				Form (Cash, Check, etc.) interest earned		
City Gahanna		State OH	Zip Code 43230		M 0	D 5	Y 3	Y 1	Amount \$0.08
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	
OH									
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	
OH									
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	
OH									
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	
OH									
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	
OH									
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	
OH									
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	
OH									

* 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)]