Statement of Contributions Received

Prescribed by Secretary of State 3/05

| Name of Committee in Full | | | | | | | | |
|--|--|-----------------------|---------------------------|---|------------|--|-----------------|---------------|
| Committee to Elect Sue Ralph | | | | | | | | |
| Full Name of Contributor | | | | Demetro | tion Nu | mber, if P | 100 | |
| Thomas S. Stewart | | | | Regist. | aliUii 14m | moer, n | AC | |
| Street Address | Employ | ет/Оссира | ation/Labor Organization* | | - | | Form (Cash, Ch | f ste Vac |
| 1296 La Rochelle Dr. | | | | | | | Check | icex, oto., |
| City | S | tate | Zip Code | Тм | T D | Y | Amount | |
| Columbus | 10 | H | 43221 | $\begin{bmatrix} 1 \\ 1 \end{bmatrix} 0$ | 1 . | | | 100.00 |
| Full Name of Contributor | | | 10221 | | | mber, if P | | 100.00 |
| Don E. Cook | | | | | | , | | |
| Street Address | Employ | er/Occupa | ntion/Labor Organization* | | | | Form (Cash, Ch | eck, etc.) |
| 1958 Marblecliff Crossing Ct. | | | | | | | Check | , |
| City | S | tate | Zip Code | М | D | Y | Amount | |
| Columbus | 0 | H | 43204 | 1 0 | 1 2 | $2 1 \epsilon$ | 5 | 100.00 |
| Full Name of Contributor | | | | _ | | nber, if P | | |
| James J. Chester | | | | ! | | | | |
| Street Address | Employe | г/Оссира | tion/Labor Organization* | | | | Form (Cash, Ch | eck, etc.) |
| 65 E. State Street, #1000 | | | | | | _ | Check | |
| City | S | tate | Zip Code | М | D | Y | Amount | |
| Columbus | 0 | H | 43215 | 1 0 | 1 2 | 2 1 e | 5 | 50.00 |
| Full Name of Contributor | | - • | | Registra | tion Nur | nber, if P | AC | |
| Dianne P. Albrecht Street Address | 1 : | | | <u> </u> | | | | |
| | Employe | er/Occupa | tion/Labor Organization* | | | | Form (Cash, Ch | eck, etc.) |
| 3990 Newhall Rd. | | | | | | | Check | |
| | _ | ate I TT | Zip Code | М | D | Y | Amount | - |
| Columbus Full Name of Contributor | 10 | <u>H</u> | 43220 | 1 0 | | | | 100.00 |
| | | | | Registra | ition Nun | nber, if P. | AC | |
| Robert M. Taylor Street Address | ੀਵ _law | <i>1</i> 0 | | <u> </u> | | | | |
| _ 1141 Highland Dr. | Employe | т/Оссира | tion/Labor Organization* | | | | Form (Cash, Ch | eck, etc.) |
| City | | ate | 75-0-4- | Τ | | τ., | Check | |
| Upper Arlington | 0, | _{апе} Н | Zip Code | M | D | $\begin{pmatrix} Y \\ 1 \end{pmatrix}$ | Amount | 5 0.00 |
| Full Name of Contributor | T U | 11 | 43220 | 1 0 | 1 2 | | | 50.00 |
| Frederick G. Cloppert, Jr. | | | | Kegistia | tion inur | nber, if P | AC | |
| Street Address | Fmploye | r/Oecupa | tion/Labor Organization* | | | | Form (Cash, Ch | |
| 1940 Ridgeview Rd. | 1 | | CON DUDO! O'BINIDACIO. | | | | Check | eck, etc.) |
| City | St | ate | Zip Code | М | D | Y | Amount | |
| Upper Arlington | 0 | Н | 43221 | $\begin{vmatrix} \ddots \\ 1 \end{vmatrix}_0$ | 112 | 1 . | | 100.00 |
| Full Name of Contributor | | | 10421 | _ | 1 1 1 4 | nber, if Pa | | 100.00 |
| William Gregory Guy | | | | | ••• | | | |
| Street Address | Employe | r/Occupa | tion/Labor Organization* | | _ | | Form (Cash, Ch | eck, etc.) |
| 5810 Shier Rings Road | | | | | | | Check | |
| City | St | ate | Zip Code | М | D | Y | Amount | |
| Dublin | 0 | Н | 43016 | 1 0 | 1 2 | 1 6 | | 250.00 |
| Full Name of Contributor Registration Number, if PAC | | | | | | | | |
| Lynn Ann Kelly | | | | | | _ | _ | |
| Street Address | Employe | r/Occupa | tion/Labor Organization* | | | | Form (Cash, Che | eck, etc.) |
| 2709 Wickliffe Rd. | | | | | | | Check | |
| City | _ | | Zip Code | М | D | Y | Amount | |
| Columbus | 10 | Н | 43221 | 10 | 1 2 | 1 6 | | 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 appear. [R.C. 3517.10(B)(4)]

| Page Total \$ | 800.00 |
|---------------|--------|