

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Adam Slane							
Full Name of Contributor Eiverna Wolpert						Registration Number, if PAC	
Street Address 4786 Davidson Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Hilliard		State OH	Zip Code 43026	M 0	D 7	Y 3	Amount \$100.00
Full Name of Contributor Justin Higgins						Registration Number, if PAC	
Street Address 2262 N. High St., Apt. O			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus		State OH	Zip Code 43201	M 0	D 8	Y 2	Amount \$100.00
Full Name of Contributor Lavern Miller						Registration Number, if PAC	
Street Address 4656 St. Frances Ln.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus		State OH	Zip Code 43213	M 0	D 8	Y 2	Amount \$40.00
Full Name of Contributor Ross & Darlene Henson						Registration Number, if PAC	
Street Address 407 Garden Heights Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus		State OH	Zip Code 43228	M 0	D 8	Y 2	Amount \$20.00
Full Name of Contributor Nancy Hunter						Registration Number, if PAC	
Street Address 8780 Alkire Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City		State OH	Zip Code 43123	M 0	D 8	Y 2	Amount \$35.00
Full Name of Contributor Walter & Thelma Campbell						Registration Number, if PAC	
Street Address 6401 Alkrie Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Galloway		State OH	Zip Code 43119	M 0	D 8	Y 2	Amount \$35.00
Full Name of Contributor Jon & Debbie Legg						Registration Number, if PAC	
Street Address 161 Walnut Creek Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Commercial Point		State OH	Zip Code 43116	M 0	D 8	Y 2	Amount \$40.00
Full Name of Contributor Kathryn Neimeister						Registration Number, if PAC	
Street Address 589 S. Terrace Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43204	M 0	D 8	Y 2	Amount \$35.00

* 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)]