

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Franklin County Green Party</b>						
Full Name of Contributor <b>Suzanne M. Patzer</b>					Registration Number, if PAC N/A	
Street Address 1021 E. Broad St.		Employer/Occupation/Labor Organization* Education Administration			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43205	M 0	D 7	Y 2	Amount \$100.00
Full Name of Contributor <b>Connie M. Hammond</b>					Registration Number, if PAC N/A	
Street Address 166 Acton Rd.		Employer/Occupation/Labor Organization* retired			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43214	M 0	D 3	Y 2	Amount \$100.00
Full Name of Contributor <b>Dennis Gong</b>					Registration Number, if PAC N/A	
Street Address 1661 Tendril Ct.		Employer/Occupation/Labor Organization* Computer technician			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43229	M 0	D 8	Y 2	Amount \$200.00
Full Name of Contributor <b>Suzanne M. Patzer</b>					Registration Number, if PAC N/A	
Street Address 1021 E. Broad St.		Employer/Occupation/Labor Organization* Education Administration			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43205	M 0	D 8	Y 2	Amount \$100.00
Full Name of Contributor <b>Robert Fitrakis</b>					Registration Number, if PAC N/A	
Street Address 1021 E. Broad St.		Employer/Occupation/Labor Organization* Professor			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43205	M 0	D 8	Y 2	Amount \$100.00
Full Name of Contributor <b>Robert Fitrakis</b>					Registration Number, if PAC N/A	
Street Address 1021 E. Broad St.		Employer/Occupation/Labor Organization* Professor			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43205	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor <b>Suzanne M. Patzer</b>					Registration Number, if PAC N/A	
Street Address 1021 E. Broad St.		Employer/Occupation/Labor Organization* Education Administration			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43205	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor <b>Robert Hart</b>					Registration Number, if PAC N/A	
Street Address 6686 Thorne St.		Employer/Occupation/Labor Organization* retired			Form (Cash, Check, etc.) check	
City Worthington	State OH	Zip Code 43085	M 1	D 2	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)]