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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

				Wandadaji sarasi kaca			en e
Name of Committee in Full							
Full Name of Contributor				Registration Number, if PAC			
Carl Jackson			200				
Street Address	Employer/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)	
3301 Woodlawn Ave						Check	
City	State-	Zip Code	М	D	Y	Amount	
Schenectady	NY	12304	0 2	2 6	0 9	100.0	Э0
Full Name of Contributor			CONTRACTOR	tion Num		С	and the second
LaDonna Hunter			100				
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)	ANDERSON
706 Columbus Ave						Check	
City	State	Zip Code	М	D	Y	Amount	
Akron	OH	44306	0 3	0 9	0 9	10.0	00
Full Name of Contributor				tion Num		C	200 Marian
Triedstone Bazaar Donations							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)	Windon advokt
858 E Third Ave						Cash	
City	State	Zip Code	М	D	Y	Amount	,
Columbus	OH	43228	0 3	2 8	0 9	36.0	00
Full Name of Contributor		an times at a communicación de la filla de		tion Num		C	MANAGEMENT OF THE PARTY OF THE
Marva Boswell							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)	
3670 Inverary						Cash	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43228	0 5	0 3	0 9	20.0	00
Full Name of Contributor			AND KINDS OF A MARKATAN CANDON	tion Num	AND DESCRIPTIONS OF THE PERSON	С	Allen Segaration
Dorothy Alexander							
Street Address	Employer/Occup	ation/Labor Organization*	E			Form (Cash, Check, etc.)	. COMPANIES COMP
2187 E Walnut St						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43207	0 5	1 8	0 9	25.0	00
Full Name of Contributor				tion Num		C	<u> 20000000000</u>
Coleman For Columbus							
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	Nonegenius Feb		
550 E Walnut St						Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	OH	43215	06	1 0	0 9	250.	00
Full Name of Contributor				ition Num			000000000000000000000000000000000000000
OAPSE AFSCME Turnaround Ohio P	Ohio PAC LA1269 LA 1269						
Street Address		ation/Labor Organization*	Rancontinuo			Form (Cash, Check, etc.)	20020000000
6805 Oak Creek Dr						Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	OH	43229	0 6	2 2	0 9	2,000.	00
Full Name of Contributor			The state of the s	tion Num	ber, if PA	Č	househous
Lloyd Martin			***				
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)	,00000000000000000000000000000000000000
53 W. 4th Sreet						Cash	
City	State	Zip Code	М	D	Y	Amount	
Mansfield	$O \mid H$	44902	0 9	1 6	0 9	30.	00

Page Total \$ 2,471.00

<sup>\*</sup> 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)]