

Statement of Contributions Received

Prescribed by Secretary of State 03/05

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Name of Committee in Full BEXLEY CITIZENS FOR ZUPNICK													
Full Name of Contributor MEROM BRACKMAN							Registration Number, if PAC						
Street Address 311 N. DREXEL AVE				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OH		Zip Code 43209		M 09		D 12		Y 11		Amount 100.00	
Full Name of Contributor REBECCA A. B. SCHEDLER							Registration Number, if PAC						
Street Address 88 S. ARDMORE RD				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City BEXLEY		State OH		Zip Code 43209		M 09		D 13		Y 11		Amount 50.00	
Full Name of Contributor RANDALL G. CUEWOT							Registration Number, if PAC						
Street Address 2662 RUHL AVE				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City BEXLEY		State OH		Zip Code 43209		M 09		D 13		Y 11		Amount 20.00	
Full Name of Contributor DAVID H. MADISON							Registration Number, if PAC						
Street Address 485 S. PARKVIEW AVE APT 110				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City BEXLEY		State OH		Zip Code 43209		M 09		D 15		Y 11		Amount 50.00	
Full Name of Contributor ERIKA HOLLIDAY							Registration Number, if PAC						
Street Address 2414 SHERWOOD RD				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OH		Zip Code 43209		M 09		D 12		Y 11		Amount 100.00	
Full Name of Contributor JOHN R. KELLOGG							Registration Number, if PAC						
Street Address 2715 SHERWOOD RD				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City BEXLEY		State OH		Zip Code 43209		M 09		D 20		Y 11		Amount 25.00	
Full Name of Contributor GEORGE G. SOLLER							Registration Number, if PAC						
Street Address 244 S. STANWOOD				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OH		Zip Code 43209		M 09		D 30		Y 11		Amount 50.00	
Full Name of Contributor STEPHEN M. FRECHTON							Registration Number, if PAC						
Street Address 343 S. ROOSEVELT				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OH		Zip Code 43209		M 09		D 30		Y 11		Amount 25.00	

* 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)]

Page Total \$ **420**