

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full						
Citizens for Hawk						
Full Name of Contributor					Registration Number, if PAC	
Barbara Lach						
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
3910 Lyon Dr					Check	
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43220	0	4	0912	\$100.00
Full Name of Contributor					Registration Number, if PAC	
Jacob Miller						
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2374 White Rd					EFT	
City	State	Zip Code	M	D	Y	Amount
Grove City	OH	43123	0	4	1112	\$20.00
Full Name of Contributor					Registration Number, if PAC	
Tom Holcombe						
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
6902 N High St					EFT	
City	State	Zip Code	M	D	Y	Amount
Worthington	OH	43085	0	4	1112	\$10.00
Full Name of Contributor					Registration Number, if PAC	
Sharon Reichard						
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2427 Marthas Wood					EFT	
City	State	Zip Code	M	D	Y	Amount
Grove City	OH	43123	0	4	1112	\$100.00
Full Name of Contributor					Registration Number, if PAC	
Chris Pedon						
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
373 S Drexel Ave					EFT	
City	State	Zip Code	M	D	Y	Amount
Bexley	OH	43209	0	4	1112	\$25.00
Full Name of Contributor					Registration Number, if PAC	
Rob Matney						
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
155 Marrus Dr					EFT	
City	State	Zip Code	M	D	Y	Amount
Gahanna	OH	43230	0	4	1112	\$25.00
Full Name of Contributor					Registration Number, if PAC	
Patrick Rafter						
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
1202 Pond Hollow Ln					EFT	
City	State	Zip Code	M	D	Y	Amount
New Albany	OH	43054	0	4	1112	\$50.00
Full Name of Contributor					Registration Number, if PAC	
Joseph Budde						
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
7267 Macbeth					EFT	
City	State	Zip Code	M	D	Y	Amount
Dublin	OH	43016	0	4	1112	\$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)]