

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Event Date

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Name of Committee in Full Tom Kneeland for City Council							
Full Name of Contributor David Montgomery						Registration Number, if PAC	
Street Address 470 Theori			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City Gahanna		State OH	Zip Code 43230		M 09	D 21	Y 03 Amount 10.00
Full Name of Contributor Mary Beth Simon						Registration Number, if PAC	
Street Address 230 Dellfield Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City Gahanna		State OH	Zip Code 43230		M 09	D 21	Y 03 Amount 10.00
Full Name of Contributor Joe Farry						Registration Number, if PAC	
Street Address 269 Bertram Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City Gahanna		State OH	Zip Code 43230		M 09	D 21	Y 03 Amount 10.00
Full Name of Contributor Frank Treadway						Registration Number, if PAC	
Street Address 772 Gulf Stream Ct.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City Gahanna		State OH	Zip Code 43230		M 09	D 21	Y 03 Amount 10.00
Full Name of Contributor Kuan Jolley						Registration Number, if PAC	
Street Address 187 Regents Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City Gahanna		State OH	Zip Code 43230		M 09	D 25	Y 03 Amount 10.00
Full Name of Contributor Jim Lewis						Registration Number, if PAC	
Street Address 295 Kimbey Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City Gahanna		State OH	Zip Code 43230		M 09	D 25	Y 03 Amount 20.00
Full Name of Contributor Jan Reed						Registration Number, if PAC	
Street Address 140 Imperial Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City Gahanna		State OH	Zip Code 43230		M 09	D 25	Y 03 Amount 20.00
Full Name of Contributor Mo Dioun						Registration Number, if PAC	
Street Address 41 N. High St.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City New Albany		State OH	Zip Code 43230		M 09	D 25	Y 03 Amount 20.00

* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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 contributors are members.

\$110.00