

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Mary Jo Hudson							
Full Name of Contributor Central Ohio Realtors Political Action Committee						Registration Number, if PAC Local PAC	
Street Address 2700 Airport Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43219-2268	M 10	D 01	Y 15	Amount \$3,000.00	
Full Name of Contributor Edward Feighan						Registration Number, if PAC	
Street Address 845 N High St			Employer/Occupation/Labor Organization* Covius CEO			Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43215-6431	M 10	D 02	Y 15	Amount \$1,000.00	
Full Name of Contributor Thomas Grote						Registration Number, if PAC	
Street Address 982 Jaeger St			Employer/Occupation/Labor Organization* Green Biologics Executive			Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43206-2625	M 10	D 02	Y 15	Amount \$500.00	
Full Name of Contributor Laura MacDonald						Registration Number, if PAC	
Street Address 3864 Mountview Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43220-4804	M 10	D 04	Y 15	Amount \$100.00	
Full Name of Contributor LYNN GREER						Registration Number, if PAC	
Street Address 1014 Saturn Ct			Employer/Occupation/Labor Organization* Makin' things happen Owner			Form (Cash, Check, etc.) Credit Card	
City Incline Village	State NV	Zip Code 89451-8714	M 10	D 05	Y 15	Amount \$1,000.00	
Full Name of Contributor Mary Ann Horton						Registration Number, if PAC	
Street Address 12531 Holland Pl			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Poway	State CA	Zip Code 92064-3211	M 10	D 05	Y 15	Amount \$50.00	
Full Name of Contributor Dale Heydlauff						Registration Number, if PAC	
Street Address 2390 Sheringham Rd			Employer/Occupation/Labor Organization* AEP Executive			Form (Cash, Check, etc.) Credit Card	
City Upper Arlington	State OH	Zip Code 43220-4368	M 10	D 06	Y 15	Amount \$250.00	
Full Name of Contributor Thomas Poetter						Registration Number, if PAC	
Street Address 2118 Dana Dr			Employer/Occupation/Labor Organization* Miami University Professor			Form (Cash, Check, etc.) Credit Card	
City Oxford	State OH	Zip Code 45056-8923	M 10	D 06	Y 15	Amount \$200.00	

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$6,100.00