

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Jeff Davis									
Full Name of Contributor Jeff Davis						Registration Number, if PAC			
Street Address 2694 Hanary Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Grove City		State OH	Zip Code 43228	43623	M 0	D 1	Y 2	Y 2	Amount \$1,000.00
Full Name of Contributor Jeff Davis						Registration Number, if PAC			
Street Address 2694 Hannary Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Grove City		State OH	Zip Code 43123		M 0	D 2	Y 1	Y 6	Amount \$1,275.00
Full Name of Contributor Emily Bright						Registration Number, if PAC			
Street Address 83 Tarryton Ct W			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) electronic bill pay		
City Columbus		State OH	Zip Code 43228		M 0	D 2	Y 1	Y 6	Amount \$5.72
Full Name of Contributor Emily Bright						Registration Number, if PAC			
Street Address 83 Tarryton Ct West			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) electronic bill pay		
City Columbus		State OH	Zip Code 43228		M 0	D 2	Y 2	Y 4	Amount \$3.00
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Amount	

* 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)]