n	12
Page	10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Friends of Joe Erb Full Name of Contributor				D 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
Bob Fackler	•			Registration Number, if PAC			
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
330 Zircon Lane					Check	eck, etc.)	
City	Grass R	М	l D	Ϋ́	Amount		
Plymouth	MN	Zip Code 55447	\int_{0}^{∞}	I -	$\begin{bmatrix} 1 \\ 1 \end{bmatrix} 1$	Allkoulk	150.00
Full Name of Contributor				tion Num	ber, if PA	C	
Dave Mayernik							
Street Address	Employer/Occu	-			Form (Cash, Che	eck, etc.)	
PO BOX 19021	Progres	onsultant			Check		
City	State	Zip Code	М	D	Y	Amount	
Pittsburgh	PA	15231	013	1 0	1 1		150.00
Full Name of Contributor	•	- 		tion Num	ber, if PA	С	
John Ramsey			l				
Street Address	. Employer/Occupation/Labor Organization*				-	Form (Cash, Check, etc.)	
PO BOX 329 145 Penn Avenue	Ramsey	ant			Check		
City	State	Zip Code	М	D	Y	Amount	
Salem	OHI	44460	014	1111	111		150.00
Full Name of Contributor		. 4-	_	tion Num	ber, if PA	С	
Mary Weldele			1				
treet Address Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
300 West Spring Street Unit 302	Retired	Retired Teacher				Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	OH	43215	012	2 3	$ _{1 1}$		150.00
Full Name of Contributor				tion Num	ber, if PA	С	
Adam Booth							
Street Address	Employer/Occup				Form (Cash, Check, etc.)		
3466 Sycamore Drive	Columb	d of Elections/ED			Check		
City	State	Zip Code	М	D	Y	Amount	
New Waterford	OH	· 44445	0 4	1 1	1 1		200.00
Full Name of Contributor	Registration Number, if PA				C		
David Johnson							
Street Address	Employer/Occup				Form (Cash, Check, etc.)		
570 Highland Avenue	Summit				Check		
City	State	Zip Code	М	D	Y	Amount	
Salem	OH!	44460	0 4	1 1	1 1		200.00
Full Name of Contributor	·			tion Num			
Daniel McCarthy							
Street Address	Employer/Occupation/Labor Organization*				_	Form (Cash, Che	eck, etc.)
4355 Shelbourne Lane	Success Group/Lobbyist					Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	OH	43220	0 3	1 5	1 1		200.00
Full Name of Contributor Registration Number, if PAC							
James Ashenhurst							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash. Check, etc.)	
5147 Vinington Place	City of Hilliard/City Councilmer			Y		Check	
City D. 1.1:	State	Zip Code	М	D	Y	Amount	050.00
Dublin	OH	43016	0 2	2 3	$1 \mid 1$		250.00

Page Total \$ 1,450.00

^{*} 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)]