	Page
Statement of Contributions Received	

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee							
Full Name of Contributor Dale E Heydlauff			Registration Number, if PAC				
Street Address 2390 Sheringham Rd					Form (Cash, Check, etc.) Credit Card		
City Upper Arlington	State OH	Zip Code 43220-4368	М 05	D 12	Y 2011	Amount \$500.00	
Full Name of Contributor Edith R Garlikov				Registration Number, if PAC			
Street Address 41 S High St	Employer/Occupation/Labor Organization* Chairman Garlikov & Assoc. Inc			Form (Cash, Check, etc.) Check			
City Columbus	State OH	Zip Code 43215-6101	М 05	D 26	Y 2011	Amount \$180.00	
Registration Number, if PAC stelle Griffin					per, if PAC		
Street Address 1918 McAllister St				Form (Cash, Check, etc.) Credit Card			
City San Francisco	State CA	Zip Code 94115-4323	М 05	D 09	Y 2011	Amount \$10.00	
Full Name of Contributor Toba Jeanne Feldman Registration N			on Numb	per, if PAC			
Street Address 4830 Shackleford Ct	Employer/Occupation/Labor Organization* Form (Cash, Check, etc. Attorney Toba Feldman Law Check						
City Columbus	State OH	Zip Code 43220-2925	M 05	D 02	Y 2011	Amount \$100.00	
Full Name of Contributor Registration Number, if PAC William A. Goldman					per, if PAC		
Street Address 500 S Front St					Form (Cash, Check, etc.) Credit Card		
City Columbus	State OH	Zip Code 43215-7631	М 04	D 06	Y 2011	Amount \$100.00	

Page Total	\$890.00
•	

^{*} 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)]