

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Sharon Whitten							
Full Name of Contributor Elizabeth Whitten					Registration Number, if PAC		
Street Address 138 Walnut Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Groveport	State O H	Zip Code 43125	M 0 6	D 1 5	Y 1 5	Amount 100.00	
Full Name of Contributor Bill R. Hedrick, Esq.					Registration Number, if PAC		
Street Address 535 West 1st Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 6	D 1 6	Y 1 5	Amount 200.00	
Full Name of Contributor Mary Tedrow					Registration Number, if PAC		
Street Address 6269 Lithopolis Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Groveport	State O H	Zip Code 43125	M 0 6	D 1 8	Y 1 5	Amount 250.00	
Full Name of Contributor Richard C. Pfeiffer, Jr.					Registration Number, if PAC		
Street Address 238 East Royal Forest Boulevard		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 0 6	D 1 8	Y 1 5	Amount 50.00	
Full Name of Contributor Amanda Petty					Registration Number, if PAC		
Street Address 6267 Meriden Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Canal Winchester	State O H	Zip Code 43146	M 0 6	D 2 4	Y 1 5	Amount 25.00	
Full Name of Contributor Chris Petty					Registration Number, if PAC		
Street Address 6267 Meriden Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Canal Winchester	State O H	Zip Code 43146	M 0 6	D 2 4	Y 1 5	Amount 50.00	
Full Name of Contributor Matt Petty					Registration Number, if PAC		
Street Address 6267 Meriden Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Canal Winchester	State O H	Zip Code 43146	M 0 6	D 2 4	Y 1 5	Amount 50.00	
Full Name of Contributor Kimberly Snyder					Registration Number, if PAC		
Street Address 10480 Bailah Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Orient	State O H	Zip Code 43146	M 0 6	D 2 7	Y 1 5	Amount 40.00	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]

Page Total \$ 765.00