

Statement of Contributions Received

Prescribed by Secretary of State 03/05

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|--|--------------------|--|---------------|---------------|--|-----------------------------|
| Name of Committee in Full Friends of Tina Pierce | | | | | | |
| Full Name of Contributor Leslie H. Wexner | | | | | Registration Number, if PAC | |
| Street Address Unknown | | Employer/Occupation/Labor Organization* Limiter Brands | | | Form (Cash, Check, etc.) Check | |
| City | State OH | Zip Code | M 0 | D 7 | Y 2 | Amount \$1,000.00 |
| Full Name of Contributor Janet Jackson | | | | | Registration Number, if PAC | |
| Street Address 2865 Castlewood Road | | Employer/Occupation/Labor Organization* United Way of Central Ohio | | | Form (Cash, Check, etc.) Check | |
| City Columbus | State OH | Zip Code 43209 | M 0 | D 7 | Y 2 | Amount \$250.00 |
| Full Name of Contributor Robert Shelly | | | | | Registration Number, if PAC | |
| Street Address 35 Brevoort Road | | Employer/Occupation/Labor Organization* Retired | | | Form (Cash, Check, etc.) PayPal | |
| City Columbus | State OH | Zip Code 43214 | M 0 | D 7 | Y 1 | Amount \$96.80 |
| Full Name of Contributor Howard Burks | | | | | Registration Number, if PAC | |
| Street Address 1041 Sugar Hill Pl. | | Employer/Occupation/Labor Organization* Unknown | | | Form (Cash, Check, etc.) Money Order | |
| City Gahanna | State OH | Zip Code 43230 | M 0 | D 8 | Y 1 | Amount \$40.00 |
| Full Name of Contributor Ruth A. Farthing | | | | | Registration Number, if PAC | |
| Street Address 602 East Weisheimer Road | | Employer/Occupation/Labor Organization* Unknown | | | Form (Cash, Check, etc.) Check | |
| City Columbus | State OH | Zip Code 43214 | M 0 | D 8 | Y 1 | Amount \$25.00 |
| Full Name of Contributor David Fogarty | | | | | Registration Number, if PAC | |
| Street Address 2770 Berkshire Road | | Employer/Occupation/Labor Organization* Unknown | | | Form (Cash, Check, etc.) PayPal | |
| City Cleveland Heights | State OH | Zip Code 44106 | M 0 | D 8 | Y 2 | Amount \$96.80 |
| Full Name of Contributor Mrs. Hanifah Kambon | | | | | Registration Number, if PAC | |
| Street Address 63 North Ohio Avenue | | Employer/Occupation/Labor Organization* Retired | | | Form (Cash, Check, etc.) Check | |
| City Columbus | State OH | Zip Code 43203 | M 0 | D 8 | Y 2 | Amount \$100.00 |
| Full Name of Contributor Sean and Sharon Dunn | | | | | Registration Number, if PAC | |
| Street Address 6057 Johnstown Road | | Employer/Occupation/Labor Organization* Law | | | Form (Cash, Check, etc.) Check | |
| City New Albany | State OH | Zip Code 43054 | M 0 | D 9 | Y 1 | Amount \$100.00 |

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

Page Total **\$1,708.60**