

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee							
Full Name of Contributor Chris Hebert						Registration Number, if PAC	
Street Address 6040 Eiger Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43213-3396	M 02	D 26	Y 2014	Amount \$50.00
Full Name of Contributor Clayton Hicks						Registration Number, if PAC	
Street Address 6283 Alissa Ln			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43213-3456	M 05	D 05	Y 2014	Amount \$100.00
Full Name of Contributor David D Hetzler						Registration Number, if PAC	
Street Address 1645 Ridgeway Pl			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43212-3320	M 03	D 25	Y 2014	Amount \$2,000.00
Full Name of Contributor Jerry MacArthur Hultin						Registration Number, if PAC	
Street Address 3 Washington Square Village			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City New York		State NY	Zip Code 10012-1814	M 05	D 08	Y 2014	Amount \$250.00
Full Name of Contributor Larry J Hotchkiss						Registration Number, if PAC	
Street Address 1241 Dublin Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215-7048	M 05	D 21	Y 2014	Amount \$250.00

* 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)]