

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends of Kristin Brvant</b>							
Full Name of Contributor <b>John Williams</b>					Registration Number, if PAC		
Street Address <b>6051 Whitney Woods Ct</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43213</b>	M <b>1   2</b>	D <b>0   4</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Revnoldsburg Education PAC</b>					Registration Number, if PAC		
Street Address <b>PO Box 880</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Revnoldsburg</b>	State <b>O   H</b>	Zip Code <b>43068</b>	M <b>1   1</b>	D <b>1   6</b>	Y <b>1   5</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>Anonymous Cash Contribution</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City	State <b>I</b>	Zip Code	M <b>1   1</b>	D <b>0   6</b>	Y <b>1   5</b>	Amount <b>30.00</b>	
Full Name of Contributor <b>Frances Weiss</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City	State <b>I</b>	Zip Code	M <b>1   1</b>	D <b>0   4</b>	Y <b>1   5</b>	Amount <b>10.00</b>	
Full Name of Contributor <b>Brie Trbojevic</b>					Registration Number, if PAC		
Street Address <b>8980 Ridgeline</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Revnoldsburg</b>	State <b>O   H</b>	Zip Code <b>43068</b>	M <b>1   1</b>	D <b>0   4</b>	Y <b>1   5</b>	Amount <b>20.00</b>	
Full Name of Contributor <b>Stonewall Democrats of Central Ohio</b>					Registration Number, if PAC		
Street Address <b>545 E Town St</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M <b>1   1</b>	D <b>0   3</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Tonya McCreary Williams</b>					Registration Number, if PAC		
Street Address <b>4956 Arbor Village Dr</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43214</b>	M <b>1   0</b>	D <b>2   6</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

\* 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)]

Page Total \$ 385.00