

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee							
Full Name of Contributor Grant Morrow III						Registration Number, if PAC	
Street Address 253 N Columbia Ave			Employer/Occupation/Labor Organization* Physician Nationwide Children's Hospital			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43209-1417	M 04	D 20	Y 2011	Amount \$250.00
Full Name of Contributor Kathleen P Murphy						Registration Number, if PAC	
Street Address 2416 Southway Dr			Employer/Occupation/Labor Organization* marketing MurphyEpson			Form (Cash, Check, etc.) Credit Card	
City Columbus		State OH	Zip Code 43221-3724	M 05	D 06	Y 2011	Amount \$50.00
Full Name of Contributor Larry M Levine						Registration Number, if PAC	
Street Address 7881 Creek Hollow Rd			Employer/Occupation/Labor Organization* Creative Designer Manufacturing Iron On Transfers			Form (Cash, Check, etc.) Credit Card	
City Blacklick		State OH	Zip Code 43004-9564	M 04	D 30	Y 2011	Amount \$100.00
Full Name of Contributor Linda Larrimer						Registration Number, if PAC	
Street Address 1856 Marblecliff Crossing Ct			Employer/Occupation/Labor Organization* Retired None			Form (Cash, Check, etc.) Credit Card	
City Columbus		State OH	Zip Code 43204-4966	M 04	D 19	Y 2011	Amount \$50.00
Full Name of Contributor Sema Muharrem						Registration Number, if PAC	
Street Address 4706 Sibel Ct			Employer/Occupation/Labor Organization* CEO Hockaden and Associates, Inc.			Form (Cash, Check, etc.) Credit Card	
City Powell		State OH	Zip Code 43065-9048	M 04	D 14	Y 2011	Amount \$25.00

* 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)]