

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Friends of Dr. Jan Gornik</i>							
Full Name of Contributor <i>Laborers Int'l of North America Local 423 RE</i>						Registration Number, if PAC	
Street Address <i>620 Alum Creek Dr.</i>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>	
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43205</i>	M <i>0</i>	D <i>7</i>	Y <i>2208</i>	Amount <i>500.00</i>	
Full Name of Contributor <i>Dennis Concilla</i>						Registration Number, if PAC	
Street Address <i>4041 Fairfax Dr.</i>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>	
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43220</i>	M <i>0</i>	D <i>7</i>	Y <i>2608</i>	Amount <i>50.00</i>	
Full Name of Contributor <i>David T. Applegate</i>						Registration Number, if PAC	
Street Address <i>945 Walker Woods</i>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>	
City <i>Marysville</i>	State <i>OH</i>	Zip Code <i>43040</i>	M <i>0</i>	D <i>7</i>	Y <i>2608</i>	Amount <i>100.00</i>	
Full Name of Contributor <i>M. Jameson Crane</i>						Registration Number, if PAC	
Street Address <i>2289 Onandaga Dr.</i>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>	
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43221</i>	M <i>0</i>	D <i>8</i>	Y <i>0108</i>	Amount <i>250.00</i>	
Full Name of Contributor <i>Vogels Inter Seymour and Pease LLP</i>						Registration Number, if PAC <i>OH 109</i>	
Street Address <i>52 E. Gay St</i>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>	
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43215</i>	M <i>0</i>	D <i>8</i>	Y <i>0408</i>	Amount <i>300.00</i>	
Full Name of Contributor <i>Contributions From Form No. 31E</i>						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State <i>OH</i>	Zip Code	M <i>0</i>	D <i>8</i>	Y <i>0608</i>	Amount <i>300.00</i>	
Full Name of Contributor <i>Regina Termine</i>						Registration Number, if PAC	
Street Address <i>47 Argyle Rd.</i>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>Pay Pal</i>	
City <i>Albertson</i>	State <i>NY</i>	Zip Code <i>11507</i>	M <i>0</i>	D <i>8</i>	Y <i>2108</i>	Amount <i>100.00</i>	
Full Name of Contributor <i>J. Bretney Williams</i>						Registration Number, if PAC	
Street Address <i>3568 Lanter View Ln</i>		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>Pay Pal</i>	
City <i>Scotts Dale</i>	State <i>OH GA</i>	Zip Code <i>30079</i>	M <i>0</i>	D <i>8</i>	Y <i>2108</i>	Amount <i>50.00</i>	

* 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)]