## Statement of Contributions Received

Page 2

Prescribed by Secretary of State 03/0

Name of Committee in Full Friends of Lori Ann Feibel				
Murray A. Davis			Registration Number, if PAC	
Street Address 360 S. Columbia Ane.	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
<sup>City</sup> Bexley	State OH	Zip Code 43209	072717	Amount 250,00
Full Name of Contributor  J. Richard Briggs	Registration Number, if PA			
Street Address 1829 Lake Shore Dr.		tion/Labor Organization*		Form (Cash, Check, etc.)
Columbus ENIL Name of Constitutor	OH State	Zip Code 43 204	072717	250 · 00
Victor Goodman  treet Address Employer/Occupation/Labor Organization*			Registration Number, if PAC	
7482 King George Dr.	Employer/Occupa State		M N V	Form (Cash, Check, etc.)
New Albauy Full Name of Contributor	OH	Zip Code 43054	M D D Y 28 17 Registration Number, if P/	Amount 150.00
Thomas N Brigdon  Street Address  Employer/Occupation/Labor Organization			Acgistration (vulleet, 11 P/	Form (Cash, Check, etc.)
2416 Commonwealth Park N	State Employer/Occupa		M D Y	chech Amount
Bexley Full Name of Contributor	OH	Zip Code 43 209	O72717 Registration Number, if P	250,00
Jeffrey D. Meyer  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.				
195 S. Columbia Ane	State	Zip Code	M D Y	check
Blx/ly Full Name of Contributor	OH	43209	080117 Registration Number, if P.	250,00
Anita L. Grossman Street Address	Employer/Occupation/Labor Organization*			Form (Çash, Check, etc.)
2696 Fair Are	State	Zip Code	M. D. Y.	Form (Cash, Check, etc.)  Check  Amount
Bex/ey Full Name of Contributor	ОН	43209	072917 Registration Number, if P.	
Martin A. Torch treet Address  Employer/Occupation/Labor Organization*  2833 Elm Ave.				Form (Cash, Check, etc.)
City	State	Zin Code	M D Y	Amount
Bexley Full Name of Contributor	ОН	43209	063117 Registration Number, if P	250,00
Jed W. Morison Street Address 2572 Brentwood Rd	Employer/Occup	ation/Labor Organization*	<u> </u>	Form (Cash, Check, etc.)
City .	State	Zip Code	M D Y	Amount
Bexley	ОН	43209	080817	100,00

Page Total \$0.00

<sup>\*</sup> 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)]