

FOR PAPER FILING ONLY

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Mindy Lambert							
Full Name of Contributor Mark A. Bainbridge					Registration Number, if PAC		
Street Address 2250 Yorkshire Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43221	M 0	D 8	Y 0	Amount 100.00	
Full Name of Contributor George Momirov					Registration Number, if PAC		
Street Address 2652 Clifton Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43221	M 0	D 8	Y 1	Amount 100.00	
Full Name of Contributor Cat for SCC					Registration Number, if PAC		
Street Address 1980 Wickerford Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code	M 0	D 8	Y 0	Amount 950.00	
Full Name of Contributor Joyce Blake					Registration Number, if PAC		
Street Address 2166 Victoria Park Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43235	M 0	D 9	Y 1	Amount 50.00	
Full Name of Contributor James Laws					Registration Number, if PAC		
Street Address 2408 Arlington Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City columbus	State OH	Zip Code 43221	M 0	D 9	Y 1	Amount 50.00	
Full Name of Contributor Marie Adamo					Registration Number, if PAC		
Street Address 2604 Henthorne Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 1	Amount 100.00	
Full Name of Contributor Kelly Kullberg					Registration Number, if PAC		
Street Address 2615 Henthorn Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 1	Amount 50.00	
Full Name of Contributor David Kullberg					Registration Number, if PAC		
Street Address 2615 Henthorn Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 1	Amount 50.00	

* 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 also appear. [R.C. 3517.10(13)(4)]

Page Total **1450.00**