

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Kari Hertel							
Full Name of Contributor Jonathan S. Hughes					Registration Number, if PAC		
Street Address 8168 Lombard Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43016	M 0	D 9	Y 1	Amount 150.00	
Full Name of Contributor Chris L. Hughes					Registration Number, if PAC		
Street Address 8168 Lombard Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43016	M 0	D 9	Y 1	Amount 150.00	
Full Name of Contributor Cindy J. McDermott					Registration Number, if PAC		
Street Address 2073 Sandover CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1	Amount 150.00	
Full Name of Contributor Anne M. Petit					Registration Number, if PAC		
Street Address 161 Alton Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Galloway	State OH	Zip Code 43119	M 0	D 9	Y 1	Amount 100.00	
Full Name of Contributor Peter M. Kostoff					Registration Number, if PAC		
Street Address 2995 Silver Maple Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Fairlawn	State OH	Zip Code 44333	M 0	D 9	Y 1	Amount 150.00	
Full Name of Contributor Pamela J. Kostoff					Registration Number, if PAC		
Street Address 2995 Silver Maple Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Fairlawn	State OH	Zip Code 44333	M 0	D 9	Y 1	Amount 100.00	
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	
Full Name of Contributor R. Kevin Kerns					Registration Number, if PAC		
Street Address 1902 Lake Shore Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43204	M 0	D 9	Y 2	Amount 150.00	

* 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)]