

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Dinesh Saxena				Registration Number, if PAC		
Street Address 4441 Wyandotte Woods Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin	State OH	Zip Code 43016-8661	M 06	D 15	Y 2013	Amount \$1,000.00
Full Name of Contributor Edward Regan				Registration Number, if PAC		
Street Address 319 Park Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Brooklyn	State NY	Zip Code 11238-3905	M 03	D 31	Y 2013	Amount \$10.00
Full Name of Contributor Gay S Pinnell				Registration Number, if PAC		
Street Address 8599 Dunsinane Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin	State OH	Zip Code 43017-8756	M 06	D 12	Y 2013	Amount \$1,000.00
Full Name of Contributor Plumbers & Pipefitters Local 189				Registration Number, if PAC PCE6220		
Street Address 1250 Kinnear Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43212-1154	M 06	D 27	Y 2013	Amount \$1,000.00
Full Name of Contributor Plumbers & Pipefitters Local 189				Registration Number, if PAC PCE6220		
Street Address 1250 Kinnear Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43212-1154	M 02	D 14	Y 2013	Amount \$500.00

* 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)]