age <u>8</u>

Statement of Contributions Received

Prescribed by Secretary of State 3/05

N		 	·					
Name of Committee in Full								
Friends of Redfern			n .					
Full Name of Contributor			Registra	ation Nun	nber, if Pa	AC		
Mark Elv	In 1 10					<u> </u>	, ,	
Street Address	Employer/Occi	upation/Labor Organization*	•			Form (Cash, Ch	ieck, etc.)	
3662 Park Street		•				Cash		
City	State	Zip Code	M	D	Y	Amount		
Grove City	[O]H	43123		016	1 1		1.00	
Full Name of Contributor			Registra	ation Nun	nber, if Pa	AC		
Sharon Sherrod								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Ch	eck, etc.)	
3656 Park Street						Cach		
City	State	Zip Code	М	D	Y	Amount		
Grove Citv	OH	43123	0 9	016	1 1		1.00	
Full Name of Contributor			Registra	ation Nun	ober, if PA	AC		
Anna Salthemier		<u> </u>						
Street Address	Employer/Occi	ipation/Labor Organization*				Form (Cash, Check, etc.)		
3624 Park Street	<u> </u>					Cash		
City	State	Zip Code	М	D	Y	Amount		
Grove City	O H	43123	019	016	111		1.00	
Full Name of Contributor	······································				ber, if P	AC		
Brent Bailev								
Street Address	Employer/Occu	pation/Labor Organization*	.			Form (Cash, Ch	eck, etc.)	
3590 Park Street		•				Cash		
City	State	Zip Code	М	D	Y	Amount	· -	
Grove Citv	Тотн	43123	019		1 1 1		1.00	
Full Name of Contributor	1 0 1	10120		_	ber, if PA	AC .	1.00	
Connie Mathews					•			
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Ch	eck etc)	
3502 Park Street						Cash	,,	
City	State	Zip Code	М	D	ΓŢ	Amount		
Grove Citv	lo Th	43123		016	1 1 1	· in our	1.00	
Full Name of Contributor	101	1 40120			ber, if PA	·C	1.00	
Andrea Krick			110,550					
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Ch	ack etc.)	
3158 Scenic Wav	in project conduction and organization					Cash	cca, ca.,	
City	State	Zip Code	Тм	D	Y	Amount		
Grove City	lo Th	43123	019	017	1 1 1 1	, another	1.00	
Full Name of Contributor	10 11	43123			ber, if PA	\C	1.00	
Sherry Bellmore			100,500	2011 11(21)				
Street Address	Fmnlover/Occur	pation/Labor Organization*				Form (Cash, Che	ank ata)	
2396 Parkview Drive	Lampioyenoceu	parion Eason Organizzation					eck, etc.)	
City	State	Zip Code	Lu	l n	ΓY	Cash		
Grove City	بنيما		M	D		Amount	4.00	
Full Name of Contributor	O H	43123		07			1.00	
			Kegistra	non Num	ber, if PA	iC .		
Tom Hendrickson Street Address	IE1/O				-	la 10 7 a		
_	Employer/Occu	pation/Labor Organization*				Form (Cash, Che	eck, etc.)	
3167 Scenic Way		Ta: 0.1	T			Cash		
•	State	Zip Code	M	D	Y	Amount		
Grove Citv	<u> </u>	43123	1019	0 7	1 1		5.00	

* 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)]

Page Total \$12.00