

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends of Redfern</b>							
Full Name of Contributor <b>Mark Elv</b>					Registration Number, if PAC		
Street Address <b>3662 Park Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>1.00</b>	
Full Name of Contributor <b>Sharon Sherrod</b>					Registration Number, if PAC		
Street Address <b>3656 Park Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>1.00</b>	
Full Name of Contributor <b>Anna Salthemier</b>					Registration Number, if PAC		
Street Address <b>3624 Park Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>1.00</b>	
Full Name of Contributor <b>Brent Bailey</b>					Registration Number, if PAC		
Street Address <b>3590 Park Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>1.00</b>	
Full Name of Contributor <b>Connie Mathews</b>					Registration Number, if PAC		
Street Address <b>3502 Park Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>1.00</b>	
Full Name of Contributor <b>Andrea Krick</b>					Registration Number, if PAC		
Street Address <b>3158 Scenic Wav</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>1.00</b>	
Full Name of Contributor <b>Sherry Bellmore</b>					Registration Number, if PAC		
Street Address <b>2396 Parkview Drive</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>1.00</b>	
Full Name of Contributor <b>Tom Hendrickson</b>					Registration Number, if PAC		
Street Address <b>3167 Scenic Way</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	M <b>0</b>	D <b>9</b>	Y <b>0</b>	Amount <b>5.00</b>	

\* 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**