

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Will Petrik for Columbus									
Full Name of Contributor Audra Phillips						Registration Number, if PAC			
Street Address 5332 Sharon Ave			Employer/Occupation/Labor Organization* Self/Midwife				Form (Cash, Check, etc.) CrowdPac		
City Columbus		State OH		Zip Code 43214		M 0		D 2	
						Y 2		Amount \$27.00	
Full Name of Contributor Doyline Williams						Registration Number, if PAC			
Street Address PO Box 91195			Employer/Occupation/Labor Organization* Lardon & Associates LLC/Director				Form (Cash, Check, etc.) CrowdPac		
City Columbus		State OH		Zip Code 43209		M 0		D 2	
						Y 2		Amount \$50.00	
Full Name of Contributor Michael Doody						Registration Number, if PAC			
Street Address 683 E. Kossuth St			Employer/Occupation/Labor Organization* Infoquest/Fraud Investigator				Form (Cash, Check, etc.) CrowdPac		
City Columbus		State OH		Zip Code 43206		M 0		D 2	
						Y 2		Amount \$27.00	
Full Name of Contributor Farrell Brody						Registration Number, if PAC			
Street Address 103 W. California Ave			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) CrowdPac		
City Columbus		State OH		Zip Code 43202		M 0		D 2	
						Y 2		Amount \$27.00	
Full Name of Contributor Kathryn Hille						Registration Number, if PAC			
Street Address 20 N Glenwood Ave			Employer/Occupation/Labor Organization* Director of Customer Service				Form (Cash, Check, etc.) CrowdPac		
City Columbus		State OH		Zip Code 43222		M 0		D 2	
						Y 2		Amount \$25.00	
Full Name of Contributor Cindy Gable						Registration Number, if PAC			
Street Address 24 Robin Hill Road			Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) CrowdPac		
City Danvers		State MA		Zip Code 01923		M 0		D 2	
						Y 2		Amount \$75.00	
Full Name of Contributor Noreen Warnock						Registration Number, if PAC			
Street Address 128 Clinton Heights Ave			Employer/Occupation/Labor Organization* Local Matters/Community Organizer				Form (Cash, Check, etc.) CrowdPac		
City Columbus		State OH		Zip Code 43202		M 0		D 2	
						Y 2		Amount \$50.00	
Full Name of Contributor Amanda King						Registration Number, if PAC			
Street Address 62 S. Ohio Ave			Employer/Occupation/Labor Organization* Consultant				Form (Cash, Check, etc.) CrowdPac		
City Columbus		State OH		Zip Code 43205		M 0		D 2	
						Y 2		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(B)(4)]