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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Safe Neighborhoods					
Full Name of Contributor Crabbe, Brown James			Registration Number, if PAC		
Street Address 500 South Front St 100	Employer/Occupa	ntion/Labor Organization*			Form (Cash, Check, etc.)
City Columbus	State OH	Zip Code 43215	M D D 21	/ <u>\</u>	Amount 500
Full Name of Contributor Brian Beach			Registration Number, if PAC		
Street Address 49 Apode Blossom Pa	Employer/Occupa	ntion/Labor Organization*	Form		Form (Cash, Check, etc.)
Pataskola	State OH	Zip Code 43062	M D 05	Y 1 め	Amount 100
Full Name of Contributor Registration Number, if PAC Denne Lamler					
Street Address	Employer/Occupa	ntion/Labor Organization*			Form (Cash, Check, etc.)
Canal Winchesta	State O ful	Zip Code 4/3//0	M D 0203	Y I O	Amount 25
Full Name of Contributor Registration Number, if PAC					
Street Address 7521 Burgstresser CT	Employer/Occupa	ntion/Labor Organization*			Form (Cash, Check, etc.)
Canol Winchester	State OH	Zip Code 43/1()	M 0 D D	1 ()	Amount 500 —
Full Name of Contributor Registration Number, if PAC Lei H Mallory					AC
Street Address 3649 Brocknell Forest	Employer/Occupa	ation/Labor Organization*			Form (Cash, Check, etc.)
Groveport	State OH	Zip Code 43/25	M D D 25	10	Amount 150
Full Name of Contributor Registration Number, if PAC Registration Number, if PAC					
Street Address 3796 Stonesthrow Ct	Employer/Occupa	ation/Labor Organization*			Form (Cash) Check, etc.)
William	State O H	Zip Code 43026	M D D O T		Amount 100
Full Name of Contributor Registration Number, if PAC A COMPACTOR OF THE STATE OF					
Street Address 11449 Woodbridg Ln	Employer/Occupa	ation/Labor Organization*			Form (Cash, Check, etc.)
Bal4Imore	State OH	Zip Code 43/05	M D O 7	Y / ()	Amount 200
Full Name of Contributor Registration Number, if PAC Registration Number, if PAC					AC
Street Address 5207 Ebright RD	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
Canal Winchester	State OH	Zip Code 43/10	M D D D 12	1 O	Amount 100

* 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)]