Statement of Contributions Received

Prescribed by Secretary of State 3/05

						-		
Name of Committee in Full								
Friends Of Jeff Davis								
Full Name of Contributor				Registration Number, if PAC				
Anita Allen								
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Chee	k, etc.)	
135 N. Harding Rd					ı	check		
City	State	Zip Code	M	D	Y	Amount		
Columbus	OH	43209	0 9 2	2 5 1	1		100.00	
Full Name of Contributor	<u> </u>	<u> </u>	Registration		, if PAC	2		
Bev Babbert								
Street Address	Employer/Occur	oation/Labor Organization*		_		Form (Cash, Chec	ck, etc.)	
3310 Kingston Ave		-				check		
City	State	Zip Code	М	D I	1	Amount		
Grove City	OH	43123	0190) 7 1	1		25.00	
Full Name of Contributor	OII	10120			if PAC	2	20.00	
Full Name of Contributor Registration Number, if PAC Frances Black								
Street Address	Employer/Occur	pation/Labor Organization*	<u> </u>			Form (Cash, Che	ck etc.)	
	12mpioyen/Occup	ortion baboi Organization			- 1	check		
1581 Chestnut Farm Loop	State	Zip Code	М	D	Y	Amount		
City		['	1		1	Allount	25.00	
Grove City	OH	43123		· · ·		^	25.00	
Full Name of Contributor			Registration	i Number	, II PAG	~		
Les Bostic	1=					E (0) 0	1 .)	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
1898 Seaside Cir	<u></u>					check	- -	
City	State	Zip Code	1 3	D	Y	Amount		
Grove City	OH	43123	0 9 0) 7 1	1 1		50.00	
Full Name of Contributor Registration Number, if PAC								
David Bright								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
2916 Buxton Lane						check		
City	State	Zip Code	М	D	Y	Amount		
Grove City	OH	43123	0 9 0) 1 :	$1 \mid 1 \mid$		50.00	
Full Name of Contributor			Registration	n Number	r, if PA	С		
Emily Bright								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
83 Tarryton Ct West					1	check		
City	State	Zip Code	М	D	Y	Amount		
Columbus	OH	43228	1 0 1	ı 8 ¹	1 1		20.00	
Full Name of Contributor	10111	10220	Registration					
Jody Burris								
Street Address	Employer/Occu	pation/Labor Organization*			- 1	Form (Cash, Che	ck, etc.)	
4375 Shirlene Ct	, in project of the				check			
City	State	Zip Code	М	D	Y	Amount		
1 ⁻	OH	43123		2 5	1 1		25.00	
Grove City Full Name of Contributor	TOI I	43123			1 1	Ċ	20.00	
Citizens for Maria Klemack-McGraw	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)							
Street Address	Employen Occupation Lacon Organization			, , , ,				
2579 Scott Ct	State Zip Code M D Y			check Amount				
City	State	Zip Code	M	D .	,	Атоил	E0.00	
Grove City	OH	43123		1 5	1 1	L	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$	345.00
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