

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends of Kristin Bryant</b>							
Full Name of Contributor <b>Monica E Hawkins</b>					Registration Number, if PAC		
Street Address <b>2815 Kingsrowe Ct</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O H</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Michael D Aaron</b>					Registration Number, if PAC		
Street Address <b>1118 Lilley Ave</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O H</b>	Zip Code <b>43206</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Neal Whitman</b>					Registration Number, if PAC		
Street Address <b>7916 Windrift Pl</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Reynoldsburg</b>	State <b>O H</b>	Zip Code <b>43068</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>20.00</b>	
Full Name of Contributor <b>Richard D Brown</b>					Registration Number, if PAC		
Street Address <b>3 S High St</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Canal Winchester</b>	State <b>O H</b>	Zip Code <b>43110</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Brendan M Inscho</b>					Registration Number, if PAC		
Street Address <b>2780 Kensington Pl E</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O H</b>	Zip Code <b>43202</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>People for Page</b>					Registration Number, if PAC		
Street Address <b>1244 Erickson Rd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O H</b>	Zip Code <b>43227</b>	M <b>0</b>	D <b>8</b>	Y <b>3</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Michael Rankin</b>					Registration Number, if PAC		
Street Address <b>2432 Wyncourtney Ct</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Powell</b>	State <b>O H</b>	Zip Code <b>43065</b>	M <b>0</b>	D <b>9</b>	Y <b>1</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Ohio Democratic Party</b>					Registration Number, if PAC		
Street Address <b>340 E Fulton St</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O H</b>	Zip Code <b>43215</b>	M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>250.00</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 \$ 620.00