

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

|                                                                |  |                    |                                         |  |                |                                           |                |
|----------------------------------------------------------------|--|--------------------|-----------------------------------------|--|----------------|-------------------------------------------|----------------|
| Name of Committee in Full<br><i>Friends of Lori Ann Feibel</i> |  |                    |                                         |  |                |                                           |                |
| Full Name of Contributor<br><i>Caryn Shapiro</i>               |  |                    |                                         |  |                | Registration Number, if PAC               |                |
| Street Address<br><i>155 N Remington Rd</i>                    |  |                    | Employer/Occupation/Labor Organization* |  |                | Form (Cash, Check, etc.)<br><i>Paypal</i> |                |
| City<br><i>Bexley</i>                                          |  | State<br><i>OH</i> | Zip Code<br><i>43209</i>                |  | M<br><i>05</i> | D<br><i>01</i>                            | Y<br><i>13</i> |
| Full Name of Contributor<br><i>Niki Callahan</i>               |  |                    |                                         |  |                | Registration Number, if PAC               |                |
| Street Address<br><i>4120 Greensview Dr.</i>                   |  |                    | Employer/Occupation/Labor Organization* |  |                | Form (Cash, Check, etc.)<br><i>Paypal</i> |                |
| City<br><i>Columbus</i>                                        |  | State<br><i>OH</i> | Zip Code<br><i>43220</i>                |  | M<br><i>04</i> | D<br><i>29</i>                            | Y<br><i>13</i> |
| Full Name of Contributor<br><i>Jennifer Brady</i>              |  |                    |                                         |  |                | Registration Number, if PAC               |                |
| Street Address<br><i>138 S Parkview Ave</i>                    |  |                    | Employer/Occupation/Labor Organization* |  |                | Form (Cash, Check, etc.)<br><i>Paypal</i> |                |
| City<br><i>Bexley</i>                                          |  | State<br><i>OH</i> | Zip Code<br><i>43209</i>                |  | M<br><i>04</i> | D<br><i>26</i>                            | Y<br><i>13</i> |
| Full Name of Contributor<br><i>Robert N. Steensen</i>          |  |                    |                                         |  |                | Registration Number, if PAC               |                |
| Street Address<br><i>5638 Hayden Run Rd</i>                    |  |                    | Employer/Occupation/Labor Organization* |  |                | Form (Cash, Check, etc.)<br><i>check</i>  |                |
| City<br><i>Hilliard</i>                                        |  | State<br><i>OH</i> | Zip Code<br><i>43026</i>                |  | M<br><i>05</i> | D<br><i>01</i>                            | Y<br><i>13</i> |
| Full Name of Contributor<br><i>JoAnne D. Grossman</i>          |  |                    |                                         |  |                | Registration Number, if PAC               |                |
| Street Address<br><i>201 S. Cassady Ave</i>                    |  |                    | Employer/Occupation/Labor Organization* |  |                | Form (Cash, Check, etc.)<br><i>check</i>  |                |
| City<br><i>Bexley</i>                                          |  | State<br><i>OH</i> | Zip Code<br><i>43209</i>                |  | M<br><i>05</i> | D<br><i>05</i>                            | Y<br><i>13</i> |
| Full Name of Contributor<br><i>Jane H. Gibson</i>              |  |                    |                                         |  |                | Registration Number, if PAC               |                |
| Street Address<br><i>7953 Schoolside Dr.</i>                   |  |                    | Employer/Occupation/Labor Organization* |  |                | Form (Cash, Check, etc.)<br><i>check</i>  |                |
| City<br><i>Westerville</i>                                     |  | State<br><i>OH</i> | Zip Code<br><i>43081</i>                |  | M<br><i>05</i> | D<br><i>10</i>                            | Y<br><i>13</i> |
| Full Name of Contributor<br><i>Catherine M Presper</i>         |  |                    |                                         |  |                | Registration Number, if PAC               |                |
| Street Address<br><i>351 S Columbia Ave</i>                    |  |                    | Employer/Occupation/Labor Organization* |  |                | Form (Cash, Check, etc.)<br><i>check</i>  |                |
| City<br><i>Bexley</i>                                          |  | State<br><i>OH</i> | Zip Code<br><i>43209</i>                |  | M<br><i>05</i> | D<br><i>14</i>                            | Y<br><i>13</i> |
| Full Name of Contributor<br><i>Anne K Jeffrey</i>              |  |                    |                                         |  |                | Registration Number, if PAC               |                |
| Street Address<br><i>296 Ashbourne Pl</i>                      |  |                    | Employer/Occupation/Labor Organization* |  |                | Form (Cash, Check, etc.)<br><i>check</i>  |                |
| City<br><i>Bexley</i>                                          |  | State<br><i>OH</i> | Zip Code<br><i>43209</i>                |  | M<br><i>05</i> | D<br><i>14</i>                            | Y<br><i>13</i> |

\* 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)]

Page Total \$ 1550.