

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends Of Jeff Davis							
Full Name of Contributor Roger Craven					Registration Number, if PAC		
Street Address 6102 Winnebago		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City	State OH	Zip Code 43123	M 0	D 9	Y 1	Amount 50.00	
Full Name of Contributor Gary Curry					Registration Number, if PAC		
Street Address 3515 Grove City Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City	State OH	Zip Code 43123	M 0	D 9	Y 2	Amount 1,000.00	
Full Name of Contributor Mark Davis					Registration Number, if PAC		
Street Address 10958 Shadow Glen Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Loveland	State OH	Zip Code 45140	M 0	D 9	Y 1	Amount 100.00	
Full Name of Contributor Joyce Davis					Registration Number, if PAC		
Street Address 2597 Vi-Lilly Cir E		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City	State OH	Zip Code 43123	M 0	D 9	Y 0	Amount 100.00	
Full Name of Contributor Diana Forrester					Registration Number, if PAC		
Street Address 4623 Clayburn Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City	State OH	Zip Code 43123	M 0	D 9	Y 1	Amount 50.00	
Full Name of Contributor Jennifer Jackson					Registration Number, if PAC		
Street Address 1880 Seaside Cir		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City	State OH	Zip Code 43123	M 0	D 9	Y 0	Amount 20.00	
Full Name of Contributor Cindy Kazalia					Registration Number, if PAC		
Street Address 2608 Kenny Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City	State OH	Zip Code 43123	M 0	D 9	Y 0	Amount 50.00	
Full Name of Contributor Jeff Killian					Registration Number, if PAC		
Street Address 5569 Spring Hill Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City	State OH	Zip Code 43123	M 0	D 9	Y 2	Amount 100.00	

* 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 \$ 1,470.00