

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee							
Full Name of Contributor Alice Faryna					Registration Number, if PAC		
Street Address 126 Amazon Pl			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43214-3504	M 11	D 02	Y 2012	Amount \$50.00	
Full Name of Contributor Beverly J Farlow Esq.					Registration Number, if PAC		
Street Address 8546 Preston Mill Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017-9648	M 10	D 31	Y 2012	Amount \$500.00	
Full Name of Contributor Gino Crocetti					Registration Number, if PAC		
Street Address 652 W 163rd St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City New York	State NY	Zip Code 10032-4513	M 11	D 02	Y 2012	Amount \$35.00	
Full Name of Contributor Ida L Copenhaver					Registration Number, if PAC		
Street Address 2448 Edington Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43221-3048	M 10	D 31	Y 2012	Amount \$200.00	
Full Name of Contributor Paula V. Deming					Registration Number, if PAC		
Street Address 6775 Alloway St W			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Worthington	State OH	Zip Code 43085-2503	M 11	D 04	Y 2012	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)]