

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Gay Pinnell					Registration Number, if PAC	
Street Address 8599 Dunsinane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin	State OH	Zip Code 43017	M 09	D 19	Y 2012	Amount \$100.00
Full Name of Contributor Georgeann G Peters					Registration Number, if PAC	
Street Address 1849 Chateaugay Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Blacklick	State OH	Zip Code 43004	M 06	D 26	Y 2012	Amount \$1,000.00
Full Name of Contributor Glenda Overbeck					Registration Number, if PAC	
Street Address 1009 Woodman Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43085	M 10	D 01	Y 2012	Amount \$100.00
Full Name of Contributor Pizzuti PAC					Registration Number, if PAC OH1260	
Street Address 2 Miranova Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215-5098	M 08	D 21	Y 2012	Amount \$2,500.00
Full Name of Contributor Serge Parisien					Registration Number, if PAC	
Street Address 113 Warwick road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Bronxville	State NY	Zip Code 10708	M 09	D 27	Y 2012	Amount \$35.00

* 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)]