

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Page 6 of 8

Name of Committee in Full Committee to Elect Hayes									
Full Name of Contributor Martin : JOAN HAYES						Registration Number, if PAC			
Street Address 125 JAN ST			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Genova			State NY		Zip Code 121156		M D Y 1 0 2 7 1 1		Amount 50.00
Full Name of Contributor J. Scott Weisman						Registration Number, if PAC			
Street Address 601 S. Hinn St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus			State OH		Zip Code 43215		M D Y 1 0 2 7 1 1		Amount 150.00
Full Name of Contributor Dennis P. Sauer						Registration Number, if PAC			
Street Address 412 CITH PARK			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus			State OH		Zip Code 43215		M D Y 1 0 2 6 1 1		Amount 25.00
Full Name of Contributor Robert Lerson						Registration Number, if PAC			
Street Address 641 N. Hinn St #3			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus			State OH		Zip Code 43215		M D Y 1 0 2 7 1 1		Amount 50.00
Full Name of Contributor Theresa Alexander						Registration Number, if PAC			
Street Address 1144 Grandview			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus			State OH		Zip Code 43212		M D Y 1 0 2 7 1 1		Amount 35.00
Full Name of Contributor Laurel Barry						Registration Number, if PAC			
Street Address 268 E. GATES ST			Employer/Occupation/Labor Organization* State of Ohio				Form (Cash, Check, etc.) CASH		
City Columbus			State OH		Zip Code 43206		M D Y 1 0 2 7 1 1		Amount 50.00
Full Name of Contributor Michael Philabaun						Registration Number, if PAC			
Street Address 601 S. Hinn St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CASH		
City Columbus Ohio			State OH		Zip Code 43206		M D Y 1 0 2 7 1 1		Amount 20.00
Full Name of Contributor Mindy Wright						Registration Number, if PAC			
Street Address 284 Zimpher St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CASH		
City Columbus			State OH		Zip Code 43206		M D Y 1 0 2 7 1 1		Amount 25.00

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$ 405