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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Michelle Mineo				
Full Name of Contributor Jane Blank			Registration Number, if PAC	
Street Address 500 S Parkview	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	M D Y 1 0 1 7	Amount \$100.00
Full Name of Contributor Registration Number, if Matt Sexton				AC
Street Address 920 Euclaire Ave	Employer/Occupation/Labor Organization*		, <u></u> ,	Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	M D Y 1 0 1 7	Amount \$50.00
Full Name of Contributor Amy Winer Registration Number, if				AC
Street Address 908 S Cassingham Road	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) cash
City Columbus	State OH	Zip Code 43209	1 0 1 2 1 7	Amount \$65.00
Full Name of Contributor Sheri Nordmam Registration Number, if P.				AC
Street Address 793 Montrose Ave	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.)
City Columbus	State OH	Zip Code 43209	M D Y 1 0 1 7	Amount \$40.00
Full Name of Contributor Tracie Baum Registration Number, if PAC				
Street Address 699 Vernon Road	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	1 0 1 2 1 7	Amount \$50.00
Full Name of Contributor Caroline Meeks Registration Number, if PAC				
Street Address 723 Montrose Ave	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	M D Y 1 0 1 2 1 7	Amount \$30.00
Full Name of Contributor Registration Number, if F Carrie Sheehan				AC
Street Address 164 N Cassingham Rd	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	1 0 1 2 1 7	Amount \$50.00
Full Name of Contributor Registration Number, if PAC Liz Pione				
Street Address 1007 Vernonn Rd	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	M D Y 1 0 1 2 1 7	Amount \$50.00

^{*}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)]