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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Franklin County Young Democrats PAC								
Full Name of Contributor				Registra	tion Numl	er, if PA	С	
Sarah Ingles				_				
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, e	tc.)	
3752 Village Club Drive	21st Cenutury Financial/Financial Advisor				Cash			
City	+	ate	Zip Code	М	D	Y	Amount	
Powell	101	Н	43065	014	2 4	1 3		10.00
Full Name of Contributor Registration Number, if PAC								
Patrick Burriss								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, e	etc.)		
13623 Thornwood Place	Thirty-One Gifts/ Communications				Cash			
City	Sta	ate	Zip Code	M	D	Y	Amount	
Columbus	0	Н	43212	0 4	1 5	1 3		10.00
Full Name of Contributor				Registrat	tion Numl	ber, if PA	С	
Corey Trusso								
Street Address	Employe	г/Оссира	tion/Labor Organization*				Form (Cash, Check, e	etc.)
135 E. Livington Ave	Nat	ionw	ide Financial/Ana	lyst			Cash	
City	Sta	ate	Zip Code	M	D	Y	Amount	
Columbus	0	Н	43215	0 4	2 4	1 3		30.00
Full Name of Contributor				Registra	tion Num	ber, if PA	С	
Jennifer House							•	
Street Address	Employer/Occupation/Labor Organization*			,	Form (Cash, Check, etc.)			
735 N. High Street	Vorys/ Communications				Cash			
City	Sta		Zip Code	М	D	Y	Amount	ļ
Columbus		Н	43215	0 4		1 3		30.00
Full Name of Contributor Registration Number, if PAC								
Kristin McKinley							<del> </del>	
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, e	:tc.)
3656 Cannongate Drive	$\leftarrow$		Attorney				Cash	
City	St	ate	Zip Code	M	D	Y	Amount	
Columbus	0	H		0 4		1 3		20.00
Full Name of Contributor				Registra	tion Num	ber, if PA	.c	
	Michaela Hahn-Lawson							
Street Address			tion/Labor Organization*				Form (Cash, Check, e	etc.)
1363 Thornwood Place	<del></del>		ate/ Staff Assistant		1-5		Cash	
City .			Zip Code	M	D	Y	Amount	10.00
Columbus	10	Н	43212		2 4			10.00
Full Name of Contributor				Kegistra	tion Num	oer, ii ra	i.C	
Gretchen James	Ir ı	-10	ai-8-b-O-asimatian#				Form (Cash, Check,	etc \
Street Address	Employer/Occupation/Labor Organization*  City of Columbus / Aide			Cash		•		
1142 Pennsylvania Ave	+	•	Zip Code	М	D	ΙΥ	Amount	
City	1 _	ate   H	43201	014		113		20.00
Columbus	10	1 1 1	43201					20.00
Full Name of Contributor Registration Number, if PAC								
Prita Sonty  eet Address					etc.)			
	Student				20.00			
1207 N. High Street Apt. 8				Amount				
1 1	0	IН	43201	014	214	113		20.00
Columbus								_0.00

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 \$	150.00