

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Redfern							
Full Name of Contributor Bill Records					Registration Number, if PAC		
Street Address 2405 Quail Meadows Driv		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0 8	D 2 8	Y 1 1	Amount 1.00	
Full Name of Contributor Michelle Lehman					Registration Number, if PAC		
Street Address 2441 Quail Meadows Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0 8	D 2 8	Y 1 1	Amount 1.00	
Full Name of Contributor Bill Ferguson					Registration Number, if PAC		
Street Address 2371 Quail Meadows Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0 8	D 2 8	Y 1 1	Amount 1.00	
Full Name of Contributor Dave Chithane					Registration Number, if PAC		
Street Address 2344 Park Ridge Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0 8	D 2 9	Y 1 1	Amount 1.00	
Full Name of Contributor David Davis					Registration Number, if PAC		
Street Address 2324 Park Ridge Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0 8	D 2 9	Y 1 1	Amount 1.00	
Full Name of Contributor Jennifer Bailey					Registration Number, if PAC		
Street Address 2314 Park Ridge Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0 8	D 2 9	Y 1 1	Amount 1.00	
Full Name of Contributor Rocky Sheetz					Registration Number, if PAC		
Street Address 2304 Park Ridge Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0 8	D 2 9	Y 1 1	Amount 1.00	
Full Name of Contributor Tim Roberts					Registration Number, if PAC		
Street Address 2309 Park Ridge Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0 8	D 2 9	Y 1 1	Amount 1.00	

* 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 \$ 8.00