31-	A			
R.C.	351	7.	1	0

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full		-							
Friends of Marilyn Brown									
Full Name of Contributor				Registration Number, if PA			С		
Kimberly Gibson									
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, C	heck, etc.)	
236 W Second							Check		
City	Sta	te	Zip Code	M	D	Y	Amount		
Columbus	0	Н	43201	1 0	2 6	0 6		150.00	
Full Name of Contributor	U		10201		tion Num		Ċ	100.00	
				registra	tion ivain	oçı, 11 1 1 1	•		
	Franklin County Democratic Party								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.			neck, etc.)	
271 E State Street			· · · · · · · · · · · · · · · · · · ·				Check		
City	Sta		Zip Code	М	D	Y	Amount		
Columbus	0	H	43215		2 6			1,500.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	С	·	
Columbus Sheet Metal Workers				#0	H105	3			
Street Address	Employer	/Occupa	ition/Labor Organization*	•	,		Form (Cash, C	heck, etc.)	
3035 Lamb Ave	' '						Check		
City	Sta	te.	Zip Code	Тм	D	Y	Amount		
Columbus	0	Н	43219	1 .	2 6			500.00	
	Ų.	* *	40219		tion Num		C ·	500.00	
Full Name of Contributor				Rogistia	tion rum	ooi, ii i A			
Lee Ryan Levine	l	10		<u> </u>			n (0.1.0	1	
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, C		
2645 N Burling				Cr			Credit	Card	
City	Sta	te	Zip Code	M	D	Y	Amount `		
Chicago	I	L	60614	1 0	2 6	0 6		23.97	
Full Name of Contributor				Registra	tion Num	ber, if PA	С		
Friends of O'Grady Committee									
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, C	heck, etc.)	
271 E State Street	' *	-	, -				Check		
City	Sta	fe.	Zip Code	М	D.	Y	Amount		
•		Н	43215	1 0	$2\overline{)7}$	t I		1,000.00	
Columbus	U		40210		tion Numl		C	1,000.00	
Full Name of Contributor				Registia	tion munn	ber, ii FA	C		
Citizens for Lori Tyack							- 10 1 0		
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, C	heck, etc.)	
947 Clubview Blvd North							Check		
City	Sta		Zip Code	M	D	Y	Amount		
Columbus	0	H	43235	1 0	2   7	0 6		1,000.00	
Full Name of Contributor					tion Numl				
Brooks for Commissioner									
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, C	heck, etc.)	
3886 N High Street	' '		· ·				Check		
City	Sta	te	Zip Code	М	D	Y	Amount		
•		Н	43214	$\begin{vmatrix} 1 \\ 1 \end{vmatrix} 0$				1,000.00	
Columbus	Ų į		40214		tion Numl		C	1,000.00	
Full Name of Contributor				Registra	uon mumi	oci, ii PA	C		
Lawrence Schaffer	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>			<u> </u>			n (* : =		
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, C	neck, etc.)	
407 E Livingston			·				Check		
City	Sta	te	Zip Code	M	D	Y	Amount		
Columbus	0	Н	43215	1 0	2 7	0 6		100.00	

\* 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 \$ 5,273.97