31-A
R.C. 3517.10

Page 18

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Friends of Redfern								
Full Name of Contributor							Registration Number, if PAC	
Sharen Goldhart								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
1535 Cree Ct.							Cash	
City	State	Zip Code	M	D	Y		Amount	
Grove City	OH	43123	10	06	11			1.00
Full Name of Contributor							Registration Number, if PAC	
Nancy Sokol								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
6435 Buckeye Dr. S.							Cash	
City	State	Zip Code	M	D	Y		Amount	
Grove City	OH	43123	10	06	11			1.00
Full Name of Contributor							Registration Number, if PAC	
Jeff Moore								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
6352 Buckeye Path							Cash	
City	State	Zip Code	M	D	Y		Amount	
Grove City	OH	43123	10	06	11			1.00
Full Name of Contributor							Registration Number, if PAC	
Joy Limbach								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
1445 Hawthorne Parkway							Cash	
City	State	Zip Code	M	D	Y		Amount	
Grove City	OH	43123	10	06	11			1.00
Full Name of Contributor							Registration Number, if PAC	
Leland Haydon								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
1277 Cloudstone							Cash	
City	State	Zip Code	M	D	Y		Amount	
Grove City	OH	43123	10	06	11			1.00
Full Name of Contributor							Registration Number, if PAC	
Richard Riggle								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
6209 Seneca Court							Cash	
City	State	Zip Code	M	D	Y		Amount	
Grove City	OH	43123	10	06	11			1.00
Full Name of Contributor							Registration Number, if PAC	
Jason Kientz								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
1475 Hawthorne							Cash	
City	State	Zip Code	M	D	Y		Amount	
Grove City	OH	43123	10	06	11			1.00
Full Name of Contributor							Registration Number, if PAC	
Louis Votaw								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
1435 Hawthorne Pkwy.							Cash	
City	State	Zip Code	M	D	Y		Amount	
Grove City	OH	43123	10	06	11			2.00

* 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 $ 9.00