

Statement of Contributions Received

Prescribed by Secretary of State 305

Name of Committee in F: Friends for Westerville Parks							
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor Evans, Mechwart, Hambleton & Titon, Inc						Registration Number, if PAC	
Street Address 5500 New Albany Road		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City New Albany	State O H	Zip Code 43054	M 18	D 2 3	Y 1 4	Amount 5,000.00	
Full Name of Contributor Klamfoth, Inc						Registration Number, if PAC	
Street Address 6630 Hill Rd		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Canal Winchester	State O H	Zip Code 43110	M 18	D 0 9	Y 1 4	Amount 500.00	
Full Name of Contributor Korda Engineering						Registration Number, if PAC	
Street Address 1650 Watermark Dr #200		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 18	D 1 1	Y 1 4	Amount 250.00	
Full Name of Contributor Leslie Fowler						Registration Number, if PAC	
Street Address 126 S Parkview Ave		Employer/Occupation/Labor Organization* Friends of Alum Creek				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43209	M 19	D 1 4	Y 1 4	Amount 450.00	
Full Name of Contributor Richard Lorenz						Registration Number, if PAC	
Street Address 2031 N Devon Rd		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43212	M 8 	D 2 9	Y 1 4	Amount 50.00	
Full Name of Contributor Playworld systems						Registration Number, if PAC	
Street Address 1000 Buffalo Road		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Lewisburg	State P A	Zip Code 17837	M 9 	D 1 3	Y 1 4	Amount 500.00	
Full Name of Contributor Douglas Fosselman						Registration Number, if PAC	
Street Address 1260 Autum Park Ct		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Westerville	State O h	Zip Code 43081	M 19	D 1 4	Y 1 4	Amount 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 \$ **6,850.00**