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## **Statement of Contributions Received**

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Gwen Callender				
Full Name of Contributor Jeffrey B. Marks			Registration Number, if PAC	
Street Address 15718 Fernway Road	Employer/Occupat	tion/Labor Organization*		Form (Cash, Check, etc.) check
City Cleveland	State OH	Zip Code 44120	M D Y 1 0 9	Amount \$50.00
Full Name of Contributor Registra Rawlins Automotive			Registration Number, if P	AC
Street Address 7040 Aly Dar Lane	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City Blacklick	State OH	Zip Code 43004	1 0 1 2 0 9	Amount \$500.00
rull Name of Contributor Lisa Zimmerman Registration Number, is			AC	
Street Address 23149 Shelburne Road	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
<sup>City</sup> Shaker Hts	State OH	Zip Code 44122	0 8 0 8 0 9	Amount \$200.00
Full Name of Contributor Lisa Brooks	Registration Number, if PA			AC
Street Address 8743 Edgerton Drive	Employer/Occupat	tion/Labor Organization*		Form (Cash, Check, etc.) check
City Powell	State OH	Zip Code 43065	0 8 2 8 0 9	Amount \$100.00
Full Name of Contributor Registration Number, if PAC Seth Marks				
Street Address 4185 Hadleigh Rd	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City University Heights	State OH	Zip Code 44118	0 9 1 7 0 9	Amount \$75.00
Full Name of Contributor Registration Numb  Dan Silverberg			Registration Number, if P	AC
Street Address 5150 Three Village Drive PHA-A	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Cleveland	State OH	Zip Code 44124	0 9 1 8 0 9	Amount \$100.00
Full Name of Contributor Natalie Silverberg			Registration Number, if PAC	
Street Address 8 Dorset Court	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Beachwood	State OH	Zip Code 44122	0 9 1 7 0 9	Amount \$100.00
Full Name of Contributor Registration Number, if PAC  Dottie Callender				AC
Street Address 750 Overlook Drive	Employer/Occupat	tion/Labor Organization*		Form (Cash, Check, etc.) check
City Alliance	State OH	Zip Code 44601	0 9 2 0 0 9	Amount \$30.00

Page Total \$1,155.00

<sup>\*</sup> 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 also appear. [R.C. 3517.10(B)(4)]