

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|                                                                  |                    |                                         |               |               |                                          |                         |  |
|------------------------------------------------------------------|--------------------|-----------------------------------------|---------------|---------------|------------------------------------------|-------------------------|--|
| Name of Committee in Full<br><b>Committee to Re-elect Fishel</b> |                    |                                         |               |               |                                          |                         |  |
| Full Name of Contributor<br><b>Joan Fishel</b>                   |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2601 E. Broad St.</b>                       |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Columbus</b>                                          | State<br><b>OH</b> | Zip Code<br><b>43209</b>                | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>                            | Amount<br><b>100.00</b> |  |
| Full Name of Contributor<br><b>Mary Lou Albertus</b>             |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>3422 River Narrows Rd.</b>                  |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Hilliard</b>                                          | State<br><b>OH</b> | Zip Code<br><b>43026</b>                | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>                            | Amount<br><b>30.00</b>  |  |
| Full Name of Contributor<br><b>Howard L. Apothaker</b>           |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>184 N. Merkle Rd.</b>                       |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Columbus</b>                                          | State<br><b>OH</b> | Zip Code<br><b>43209</b>                | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>                            | Amount<br><b>75.00</b>  |  |
| Full Name of Contributor<br><b>Susan E. Ashbrook</b>             |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2994 Crescent Dr.</b>                       |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Columbus</b>                                          | State<br><b>OH</b> | Zip Code<br><b>43204</b>                | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>                            | Amount<br><b>100.00</b> |  |
| Full Name of Contributor<br><b>Richard Barnett</b>               |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>43 S. Cassingham Rd.</b>                    |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Columbus</b>                                          | State<br><b>OH</b> | Zip Code<br><b>43209</b>                | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>                            | Amount<br><b>18.00</b>  |  |
| Full Name of Contributor<br><b>Ken Blum</b>                      |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2444 Bexley Park Rd.</b>                    |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Columbus</b>                                          | State<br><b>OH</b> | Zip Code<br><b>43209</b>                | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>                            | Amount<br><b>18.00</b>  |  |
| Full Name of Contributor<br><b>Barbara Ellison</b>               |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>241 S. Ardmore Rd.</b>                      |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Columbus</b>                                          | State<br><b>OH</b> | Zip Code<br><b>43209</b>                | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>                            | Amount<br><b>25.00</b>  |  |
| Full Name of Contributor<br><b>Julie Fino</b>                    |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>1165 Sunnyhill Rd.</b>                      |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Columbus</b>                                          | State<br><b>OH</b> | Zip Code<br><b>43221</b>                | M<br><b>0</b> | D<br><b>9</b> | Y<br><b>1</b>                            | Amount<br><b>25.00</b>  |  |

\* 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 \$ **391.00**