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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee	****						
Fult Name of Contributor Jennifer L McNally				Registration Number, if PAC			
Street Address 2409 Brentwood Rd.	Employ	Employer/Occupation/Labor Organization*					
City Bexley	State OH	Zip Code 43209	M 07	D 20	Y 2012	Amount \$250.00	
Full Name of Contributor John P. McConnell	Registration Number, if PAC						
Street Address 200 Old Wilson Bridge Rd.	Employ	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43085	M 09	D 14	Y 2012	Amount \$2,500.00	
Full Name of Contributor Julia McLemore Registration Number, if PAC							
Street Address PO Box 499	Employ	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Credit Card					
City Charlevoix	State MI	Zip Code 49720	M 08	D 28	Y 2012	Amount \$200.00	
Full Name of Contributor Kamran Majidzadeh	Registration Number, if PAC						
Street Address 4621 Edgcote Ct	Employ	Employer/Occupation/Labor Organization* Form (Cash, Check, etc. Credit Card					
City New Albany	State OH	Zip Code 43054	M 10	D 03	Y 2012	Amount \$1,000.00	
Full Name of Contributor Ranjan Manoranjan Registration Number, if PAC							
Street Address 344 Cramer Creek Ct	Employ	Employer/Occupation/Labor Organization*					
City Dublin	State OH	Zip Code 43017	M 09	D 24	Y 2012	Amount \$500.00	

Page Total	\$4,450.00
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^{*} 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)]