

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Metro Parks							
Full Name of Contributor Richard P. MacDonell					Registration Number, if PAC		
Street Address 320 Medick Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085-3034	M 0 4	D 0 2	Y 0 9	Amount \$100.00	
Full Name of Contributor Nancy N. Lurie					Registration Number, if PAC		
Street Address 6060 Cranberry Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 4	D 0 2	Y 0 9	Amount \$100.00	
Full Name of Contributor Jerome T. Rampelt					Registration Number, if PAC		
Street Address 3875 Olentangy Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 0 4	D 0 3	Y 0 9	Amount \$100.00	
Full Name of Contributor Marjorie Cole Baker					Registration Number, if PAC		
Street Address 439 South Harding Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43209	M 0 4	D 0 5	Y 0 9	Amount \$50.00	
Full Name of Contributor David and Cynthia Staudenmeir					Registration Number, if PAC		
Street Address 7073 Havens Corners Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Blacklick	State O H	Zip Code 43004	M 0 4	D 0 6	Y 0 9	Amount \$50.00	
Full Name of Contributor Mike Skimin					Registration Number, if PAC		
Street Address 627 Broad Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Elyria	State O H	Zip Code 44035	M 0 4	D 0 6	Y 0 9	Amount \$25.00	
Full Name of Contributor Ultimate Form Fitness, Inc.					Registration Number, if PAC		
Street Address 5825 Ketch Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Lewis Center	State O H	Zip Code 43035	M 0 4	D 0 6	Y 0 9	Amount \$200.00	
Full Name of Contributor Wolfe Enterprises, Inc.					Registration Number, if PAC		
Street Address 34 South Third Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 4	D 0 7	Y 0 9	Amount \$2,500.00	

* 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 \$ 3,125.00