

**Statement of Contributions Received
at a Social or Fund-Raising Event**
Prescribed by Secretary of State 3/05

Event Date 03/09/2015
Page 15 Miranova Event

Name of Committee in Full Friends of Mary Jo Hudson						
Full Name of Contributor Sandy Anderson			Registration Number, if PAC			
Street Address 7677 Riverside Dr	Employer/Occupation/Labor Organization* None Retired		M 03	D 09	Y 15	Amount \$500.00
City Dublin	State OH	Zip Code 43016-8241	Form (Cash, Check, etc.) Credit Card			
Full Name of Contributor Jameson Crane			Registration Number, if PAC			
Street Address 299 N Parkview Ave	Employer/Occupation/Labor Organization* Retired Retired		M 03	D 09	Y 15	Amount \$2,500.00
City Columbus	State OH	Zip Code 43209-1437	Form (Cash, Check, etc.) Check			
Full Name of Contributor Sherry M. Geldin			Registration Number, if PAC			
Street Address 2503 Bryden Rd	Employer/Occupation/Labor Organization* Wexner Center for the Arts Director		M 03	D 09	Y 15	Amount \$500.00
City Columbus	State OH	Zip Code 43209-2133	Form (Cash, Check, etc.) Check			
Full Name of Contributor Donna James			Registration Number, if PAC			
Street Address 1 Miranova Pl Ste 340	Employer/Occupation/Labor Organization* Lardon and Associates President		M 03	D 09	Y 15	Amount \$250.00
City Columbus	State OH	Zip Code 43215-5072	Form (Cash, Check, etc.) Check			
Full Name of Contributor Jack Johnson <i>Jackson</i>			Registration Number, if PAC			
Street Address 126 W Jeffrey Pl	Employer/Occupation/Labor Organization* Wexner Center for the Arts Deputy Director		M 03	D 09	Y 15	Amount \$500.00
City Columbus	State OH	Zip Code 43214-2019	Form (Cash, Check, etc.) Check			
Full Name of Contributor Tom Katzenmeyer			Registration Number, if PAC			
Street Address 448 W Nationwide Blvd Apt 401	Employer/Occupation/Labor Organization* Greater Columbus Arts Council CEO		M 03	D 09	Y 15	Amount \$500.00
City Columbus	State OH	Zip Code 43215-2396	Form (Cash, Check, etc.) Check			
Full Name of Contributor Nancy Kramer			Registration Number, if PAC			
Street Address 955 Urlin Ave	Employer/Occupation/Labor Organization* Resource Interactive Founder		M 03	D 09	Y 15	Amount \$500.00
City Columbus	State OH	Zip Code 43212-3322	Form (Cash, Check, etc.) Check			
Full Name of Contributor Laurie Marsh			Registration Number, if PAC			
Street Address 57 Riverview Park Dr	Employer/Occupation/Labor Organization* Leadership Columbus Executive Director		M 03	D 09	Y 15	Amount \$250.00
City Columbus	State OH	Zip Code 43214-2022	Form (Cash, Check, etc.) Check			