

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full FRIENDS FOR KEYES - STEPHEN KEYES, TREASURER - 206 N. DREXEL AVE. - BEXLEY OH 43209							
Full Name of Contributor MEROM BRACHMAN						Registration Number, if PAC	
Street Address 311 N. DREXEL		Employer/Occupation/Labor Organization* EXECUTIVE / YENKIN-MATESTIC				Form (Cash, Check, etc.) CHECK	
City BEXLEY	State OH	Zip Code 43209	M 0	D 9	Y 0111	Amount \$ 100	
Full Name of Contributor DEBBIE KANE						Registration Number, if PAC	
Street Address 181 STANBURY		Employer/Occupation/Labor Organization* COLS. SCHOOL FOR GIRLS / TEACHER				Form (Cash, Check, etc.) CHECK	
City BEXLEY	State OH	Zip Code 43209	M 0	D 9	Y 1211	Amount \$ 50	
Full Name of Contributor MICHAEL & KARIN YAFFE						Registration Number, if PAC	
Street Address 307 S. PARKVIEW		Employer/Occupation/Labor Organization* MCCONNELL / PHYSICIAN				Form (Cash, Check, etc.) CHECK	
City BEXLEY	State OH	Zip Code 43209	M 0	D 9	Y 1911	Amount \$ 50	
Full Name of Contributor MARTHA (PEGGY) LAZARUS						Registration Number, if PAC	
Street Address 2770 BEXLEY PARK RD.		Employer/Occupation/Labor Organization* CONSULTANT / SELF				Form (Cash, Check, etc.) CHECK	
City BEXLEY	State OH	Zip Code 43209	M 0	D 9	Y 1911	Amount \$ 100	
Full Name of Contributor CAROL LANNAN						Registration Number, if PAC	
Street Address 832 VERNON RD.		Employer/Occupation/Labor Organization* CHASE BANK / IT PROFESSIONAL				Form (Cash, Check, etc.) CHECK	
City BEXLEY	State OH	Zip Code 43209	M	D	Y	Amount \$ 25	
Full Name of Contributor SARAH ZIEGLER						Registration Number, if PAC	
Street Address 386 N. PARKVIEW		Employer/Occupation/Labor Organization* SELF				Form (Cash, Check, etc.) CHECK	
City BEXLEY	State OH	Zip Code 43209	M 1	D 0	Y 2011	Amount \$ 400	
Full Name of Contributor JAMES WILSON						Registration Number, if PAC	
Street Address 2404 BEXLEY PK. RD		Employer/Occupation/Labor Organization* VOAYS LAW FIRM / ATTORNEY				Form (Cash, Check, etc.) CREDIT CARD	
City BEXLEY	State OH	Zip Code 43209	M 0	D 6	Y 0211	Amount \$ 150	
Full Name of Contributor STEVEN MAURER						Registration Number, if PAC	
Street Address 2560 STANBURY		Employer/Occupation/Labor Organization* ADMINISTRATOR / U.S. DEPT. OF AGRIC.				Form (Cash, Check, etc.) CREDIT CARD	
City BEXLEY	State OH	Zip Code 43209	M 0	D 6	Y 0211	Amount \$ 40	

* 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)]