

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Gwen Callender									
Full Name of Contributor Jennifer Simpson							Registration Number, if PAC		
Street Address 651 E High St			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Mt. Gilead		State OH	Zip Code 43338	M 0	D 8	Y 0	Y 5	Y 0	Amount \$50.00
Full Name of Contributor Susan Heigel							Registration Number, if PAC		
Street Address 4131 Brinsworth Drive			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Dublin		State OH	Zip Code 43016	M 0	D 8	Y 0	Y 5	Y 0	Amount \$50.00
Full Name of Contributor Lisa McClellan							Registration Number, if PAC		
Street Address 2552 Bouchard Court			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Powell		State OH	Zip Code 43065	M 0	D 8	Y 0	Y 5	Y 0	Amount \$50.00
Full Name of Contributor Catherine Brockman							Registration Number, if PAC		
Street Address 765 Lakeview Drive			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City West Jefferson		State OH	Zip Code 43162	M 0	D 8	Y 0	Y 5	Y 0	Amount \$50.00
Full Name of Contributor Sabrina Hussey							Registration Number, if PAC		
Street Address 8764 Crampton Drive			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Powell		State OH	Zip Code 43065	M 0	D 8	Y 0	Y 5	Y 0	Amount \$50.00
Full Name of Contributor Jodi Cooper							Registration Number, if PAC		
Street Address 7918 Stanburn Road			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Dublin		State OH	Zip Code 43016	M 0	D 8	Y 0	Y 5	Y 0	Amount \$15.00
Full Name of Contributor Dawn Liebensperger							Registration Number, if PAC		
Street Address 2535 Brixton Road			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) check		
City Columbus		State OH	Zip Code 43221	M 0	D 8	Y 0	Y 4	Y 0	Amount \$25.00
Full Name of Contributor Kirk Pearson							Registration Number, if PAC		
Street Address 2592 Bouchard Court			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) cash		
City Powell		State OH	Zip Code 43065	M 0	D 8	Y 0	Y 9	Y 0	Amount \$30.00

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$320.00**