

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Bird							
Full Name of Contributor Cynthia Vilardo					Registration Number, if PAC		
Street Address 33 W. Broadway St.		Employer/Occupation/Labor Organization* Clergy			Form (Cash, Check, etc.) Check		
City Westerville	State OH <input checked="" type="checkbox"/>	Zip Code 43081	M 0	D 9	Y 0	Amount \$150.00	
Full Name of Contributor Stuart J Gartrell					Registration Number, if PAC		
Street Address 4359 Big Walnutview Dr.		Employer/Occupation/Labor Organization* Project Manager			Form (Cash, Check, etc.) Check		
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43230	M 1	D 0	Y 0	Amount \$300.00	
Full Name of Contributor Nancy Mcfarland					Registration Number, if PAC		
Street Address 59 College Pl.		Employer/Occupation/Labor Organization* Self Employed			Form (Cash, Check, etc.) Check		
City Westerville	State OH <input checked="" type="checkbox"/>	Zip Code 43081	M 0	D 9	Y 1	Amount \$3,500.00	
Full Name of Contributor Tony Fluellen					Registration Number, if PAC		
Street Address 561 Heatherbrooke way		Employer/Occupation/Labor Organization* information technology			Form (Cash, Check, etc.) Cash		
City Westerville	State OH <input checked="" type="checkbox"/>	Zip Code 43081	M 0	D 7	Y 2	Amount \$10.00	
Full Name of Contributor Richard Bird					Registration Number, if PAC		
Street Address 6961 Whitetail Ln.		Employer/Occupation/Labor Organization* Information technology			Form (Cash, Check, etc.) Cash		
City Westerville	State OH <input checked="" type="checkbox"/>	Zip Code 43082	M 0	D 7	Y 2	Amount \$40.00	
Full Name of Contributor OAPSE AFSCME Turnaround Ohio PA LA 1269					Registration Number, if PAC		
Street Address 6805 Oak Creek Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43229	M 0	D 9	Y 1	Amount \$250.00	
Full Name of Contributor Westerville Education Association					Registration Number, if PAC		
Street Address 519 Otterbein Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville	State OH <input checked="" type="checkbox"/>	Zip Code 43081	M 1	D 0	Y 0	Amount \$2,000.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State OH <input checked="" type="checkbox"/>	Zip Code	M	D	Y	Amount	

* 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)]