

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Friends of Lori Ann Feibel</i>													
Full Name of Contributor <i>Angela R. Lehen</i>						Registration Number, if PAC							
Street Address <i>466 Furman St.</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>						
City <i>Pickerington</i>		State <i>OH</i>		Zip Code <i>43147</i>		M <i>05</i>		D <i>02</i>		Y <i>13</i>		Amount <i>75.00</i>	
Full Name of Contributor <i>Kandi L. Pach</i>						Registration Number, if PAC							
Street Address <i>2541 Colts Neck Rd</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>						
City <i>Blacklick</i>		State <i>OH</i>		Zip Code <i>43004</i>		M <i>05</i>		D <i>02</i>		Y <i>13</i>		Amount <i>75.00</i>	
Full Name of Contributor <i>Joanne L. Feibel</i>						Registration Number, if PAC							
Street Address <i>767 S. Roosevelt Ave</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>						
City <i>Bexley</i>		State <i>OH</i>		Zip Code <i>43209</i>		M <i>05</i>		D <i>02</i>		Y <i>13</i>		Amount <i>75.00</i>	
Full Name of Contributor <i>Kimberly Erickson</i>						Registration Number, if PAC							
Street Address <i>7811 Windy Hill Ct.</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>						
City <i>Dublin</i>		State <i>OH</i>		Zip Code <i>43016</i>		M <i>05</i>		D <i>02</i>		Y <i>13</i>		Amount <i>50.00</i>	
Full Name of Contributor <i>Penny Masters Boes</i>						Registration Number, if PAC							
Street Address <i>515 Tucker Ave</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>						
City <i>Worthington</i>		State <i>OH</i>		Zip Code <i>43085</i>		M <i>05</i>		D <i>02</i>		Y <i>13</i>		Amount <i>75.00</i>	
Full Name of Contributor <i>Lynne E. C. Smith</i>						Registration Number, if PAC							
Street Address <i>7809 Lambton Pk Road</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>						
City <i>New Albany</i>		State <i>OH</i>		Zip Code <i>43054</i>		M <i>05</i>		D <i>02</i>		Y <i>13</i>		Amount <i>75.00</i>	
Full Name of Contributor <i>Christopher Zoeller</i>						Registration Number, if PAC							
Street Address <i>107 Oakbridge Park</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>						
City <i>Tiffin</i>		State <i>OH</i>		Zip Code <i>44883</i>		M <i>05</i>		D <i>02</i>		Y <i>13</i>		Amount <i>100.00</i>	
Full Name of Contributor <i>Kathleen Myers Ostrowski</i>						Registration Number, if PAC							
Street Address <i>7262 Rosegate Pl</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>						
City <i>Dublin</i>		State <i>OH</i>		Zip Code <i>43017</i>		M <i>05</i>		D <i>02</i>		Y <i>13</i>		Amount <i>200.00</i>	

* 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 \$ 725