Statement of Contributions Received



Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Jeff Davis				
Full Name of Contributor Registration Number, if PAC Thomas D, Norris				
Street Address 6712 Ridpath Rd	Employer/Occupati	on/Labor Organization		Form (Cash, Check, etc.) check
City Grove City	State OH	Zip Code 43123	M D Y D 9 2 1 1 5	Amount \$500.00
Full Name of Contributor the success group Registration Number, if PAC				vc .
Street Address 172 E. State St Suite 400	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)
City Columbus	State OH	Zip Code 43215	D 8 1 4 1 5	Amount \$300.00
Will Name of Contributor Registration Number, if PAC Michael Uhrin				
Street Address 5580 Meadowgrove Drive	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Grove City	State OH	Zip Code 43123	0 9 0 9 1 5	Amount \$500.00
Full Name of Contributor Registration Number, if PAC Gary L Leasure				
Street Address 4780 Saint Andrews Drive	Employer/Occupati	on/Labor Organization	,	Form (Cash, Check, etc.) check
City // Grove City	State OH	2ip Code -43123	M D Y 5	Amount \$1,000.00
Full Name of Contributor Registration Number, if PAC Ginni D Ragan				
Street Address 300 W, Spring St #1602	Employer/Occupation/Labor Organization			Form (Cash, Cheek, etc.) check
City Columbus	State OH	Zip Code 43215	0 9 1 7 1 5	Amount \$1,000:00
Full Name of Contributor Registration Number, if PAC Robert D. Swanson				
Street Address 2737 Clark Drive	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check
City Grove City	State OH	Zip Code 43123	M D Y 7 9 1 5 1 5	Атюшлі \$500.00
Full Name of Contributor Registration Number, if PA David Bright				AC
Street Address 2916 Buxton Ln	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Grove City	State OH	Zip Code 43123	M D Y D 9 2 2 1 5	**************************************
Full Name of Contributor Diana Hannon Forrester Registration Number, if PAC				
Street Address 4373 Clayburn Ct	Employer/Occupat	ion/Labor Organization		Form (Cash, Check, etc.)
City Grove City	State OH	Zip Code 43123	0 9 2 2 1 5	Amount \$100.00

Page Total \$4,000.00

^{*} 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)]