

FOR PAPER FILING ONLY

Statement of Contributions Received

Page 2

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Mindy Lambert						
Full Name of Contributor James Hitt				Registration Number, if PAC		
Street Address 2136 Coach Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1	Amount 100.00
Full Name of Contributor John Deal				Registration Number, if PAC		
Street Address 2575 Wexford Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 1	Amount 100.00
Full Name of Contributor Constance McGowan				Registration Number, if PAC		
Street Address 2092 Middlesex Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1	Amount 50.00
Full Name of Contributor William Gabel				Registration Number, if PAC		
Street Address 2140 Parkway Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1	Amount 100.00
Full Name of Contributor George Momirov				Registration Number, if PAC		
Street Address 2642 Clifton Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 1	Amount 40.00
Full Name of Contributor William Barker				Registration Number, if PAC		
Street Address 1828 Ridgeview Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43221	M 1	D 0	Y 0	Amount 200.00
Full Name of Contributor Joseph Shehadi				Registration Number, if PAC		
Street Address 3905 Tarrington Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Upper Arlington	State OH	Zip Code 43220	M 1	D 0	Y 0	Amount 200.00
Full Name of Contributor Steve Sikora				Registration Number, if PAC		
Street Address 2540 Middlesex Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Upper Arlington	State OH	Zip Code 43220	M 1	D 0	Y 0	Amount 150.00

* 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 **940.00**