

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Ian Nicky					Registration Number, if PAC	
Full Name of Contributor Brian Hicks					Registration Number, if PAC	
Street Address 21 E. State St., Ste. 2200		Employer/Occupation/Labor Organization* Hicks Partners		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43215	M 0	D 8	Y 15	Amount \$500
Full Name of Contributor Luke Gilchrist					Registration Number, if PAC	
Street Address 4794 Richland Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43230	M 0	D 9	Y 15	Amount \$100
Full Name of Contributor Christine Nicky					Registration Number, if PAC	
Street Address 1458 Sand Ridge Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Bowling Green	State OH	Zip Code 43402	M 0	D 9	Y 15	Amount \$100
Full Name of Contributor Ronald Nicky					Registration Number, if PAC	
Street Address 1458 Sand Ridge Rd.		Employer/Occupation/Labor Organization* Nicky Properties - self employed		Form (Cash, Check, etc.) check		
City Bowling Green	State OH	Zip Code 43402	M 0	D 9	Y 15	Amount \$500
Full Name of Contributor Keith Conroy					Registration Number, if PAC	
Street Address 10181 Watkins Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Marysville	State OH	Zip Code 43040	M 0	D 9	Y 16	Amount \$100
Full Name of Contributor Amy Swanson					Registration Number, if PAC	
Street Address 998 Montrose Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 20	Amount \$20
Full Name of Contributor Thomas James					Registration Number, if PAC	
Street Address 865 Francis Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 20	Amount \$25
Full Name of Contributor Citizens for Bruce Johnson					Registration Number, if PAC	
Street Address 100 S. Third St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43215	M 0	D 9	Y 30	Amount \$400

* 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)]