

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Metro Parks									
Full Name of Contributor Donald G. Dunn						Registration Number, if PAC			
Street Address 5057 Clark State Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna		State O H		Zip Code 43230		M 0 3	D 0 2	Y 0 9	Amount \$1,000.00
Full Name of Contributor Joseph C. Bowman and Carroll A. Bowman						Registration Number, if PAC			
Street Address P. O. Box 182022			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43218		M 0 3	D 0 2	Y 0 9	Amount \$100.00
Full Name of Contributor Ohio Wetlands Foundation						Registration Number, if PAC			
Street Address 1220 Stone Run Court			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Lancaster		State O H		Zip Code 43130		M 0 3	D 0 3	Y 0 9	Amount \$1,000.00
Full Name of Contributor Randall S. Arndt						Registration Number, if PAC			
Street Address 272 Ashbourne Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43209		M 0 3	D 0 3	Y 0 9	Amount \$100.00
Full Name of Contributor Diane McCloy						Registration Number, if PAC			
Street Address 5932 Whittingham Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin		State O H		Zip Code 43017		M 0 3	D 0 4	Y 0 9	Amount \$100.00
Full Name of Contributor White Castle System, Inc.						Registration Number, if PAC			
Street Address 555 West Goodale Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43216-1498		M 0 3	D 0 5	Y 0 9	Amount \$5,000.00
Full Name of Contributor Norman E. Lobdell and Diane E. Lobdell						Registration Number, if PAC			
Street Address 3669 Bolamo Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville		State O H		Zip Code 43081		M 0 3	D 0 5	Y 0 9	Amount \$20.00
Full Name of Contributor William G. Jurgensen and Patricia M. Jurgensen						Registration Number, if PAC			
Street Address 300 West Spring Street, Apt. 2000			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43215		M 0 3	D 0 5	Y 0 9	Amount \$100.00

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 7,420.00