

Statement of Contributions Received

ORC 3517.10

Campaign Finance | (614) 466-3111 www.OhioSecretaryofState.gov cfinance@OhioSecretaryofState.gov

Full Name of Committee	. 0.	,			
Friends of Sharon C	White	ter			
Full Name of Contributor		·		Registration Number	er, if PAC
Lings Beck					
Street Address	Employ	er/Occupation/Labor O	rganization*		Form (Cash, Check, etc.)
Street Address 5545 Harriet St.				Chech 2 4174	
City	State	Zip Code	Ichie	1,7	
Groveport	ОН	43125	19/16,	MM/DD/YYYY	2500
Full Name of Contributor		•	•	Registration Number	er, if PAC
Street Address	Employ	er/Occupation/Labor O	rganization*		Form (Cash, Check, etc.)
			_		
City	State	Zip Code			Amount
	ОН			MM/DD/YYYY	
Full Name of Contributor				Registration Number	er, if PAC
Rich Brown					
Street Address	Employ	er/Occupation/Labor O	rganization*		Form (Cash, Check, etc.)
City Canal Winchester					Check 5479
City	State	Zip Code 43/10			Amount
Canal Winchester	ОН	43110		MM/DD/YYYY	5000
Full Name of Contributor	•	•	•	Registration Number	er, if PAC
Street Address	Employ	er/Occupation/Labor O	rganization*		Form (Cash, Check, etc.)
City	State	Zip Code			Amount
	ОН			MM/DD/YYYY	
Full Name of Contributor		'		Registration Number	er, if PAC
Street Address	Employ	er/Occupation/Labor O	rganization*	L	Form (Cash, Check, etc.)
City	State	Zip Code			Amount
	он			MM/DD/YYYY	

*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)]