

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee							
Full Name of Contributor Felicia Bernardini						Registration Number, if PAC	
Street Address 3083 Woodbine Pl			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43202-1430	M 02	D 18	Y 2012	Amount \$250.00	
Full Name of Contributor Frost Brown Todd LLC PAC						Registration Number, if PAC OH783	
Street Address 2200 Pnc Ctr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Cincinnati	State OH	Zip Code 45202-4113	M 02	D 10	Y 2012	Amount \$500.00	
Full Name of Contributor Janet Burns						Registration Number, if PAC	
Street Address 2428 Canterbury Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Money Order	
City Columbus	State OH	Zip Code 43221-3012	M 02	D 17	Y 2012	Amount \$250.00	
Full Name of Contributor Loann W. Crane						Registration Number, if PAC	
Street Address 1 Miranova Pl			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215-5079	M 02	D 20	Y 2012	Amount \$250.00	
Full Name of Contributor Margaret L Concilla						Registration Number, if PAC	
Street Address 4041 Fairfax Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220-4522	M 02	D 20	Y 2012	Amount \$500.00	

* 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)]