31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Friends of Nancy Drees								
Full Name of Contributor							Registration Number, if PAC	
Thomas F. Davis								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
1922 Arlington Ave.							Check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O | H	43212	0 | 8	2 | 6	1 | 1		100.00	
Full Name of Contributor							Registration Number, if PAC	
Lisa Berens								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
2615 Johnston Rd.							Check	
City	State	Zip Code	M	D	Y		Amount	
Upper Arlington	O | H	43220	0 | 8	2 | 6	1 | 1		25.00	
Full Name of Contributor							Registration Number, if PAC	
Charlotte C. Simmons								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
4294 Mumford Dr.							Check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O | H	43220	0 | 8	2 | 6	1 | 1		25.00	
Full Name of Contributor							Registration Number, if PAC	
Kimberly W. Toothman								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
2100 Pinebrook Rd.							Check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O | H	43220	0 | 8	2 | 6	1 | 1		100.00	
Full Name of Contributor							Registration Number, if PAC	
Karen L. Trotier								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
2650 Sandover Rd.							Check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O | H	43220	0 | 8	2 | 6	1 | 1		50.00	
Full Name of Contributor							Registration Number, if PAC	
David J. Buck								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
4146 Clairmont Rd.							Check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O | H	43220	0 | 8	2 | 6	1 | 1		50.00	
Full Name of Contributor							Registration Number, if PAC	
Caroline A. Rutherford								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
4499 Summit Ridge Rd.							Check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O | H	43220	0 | 8	2 | 6	1 | 1		35.00	
Full Name of Contributor							Registration Number, if PAC	
Jodi L. Patton								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
4766 Riverside Dr.							Check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O | H	43220	0 | 8	2 | 6	1 | 1		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 $ 485.00