

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Kiwan Lawson							
Full Name of Contributor Kiwan Lawson					Registration Number, if PAC		
Street Address 1172 Koebel Road		Employer/Occupation/Labor Organization* Playtime Pre School			Form (Cash, Check, etc.) EFT		
City Columbus	State O H	Zip Code 43207	M 0 1	D 1 0	Y 1 5	Amount 300.00	
Full Name of Contributor Mike W Bush					Registration Number, if PAC		
Street Address 5008 Donna Sue Dr		Employer/Occupation/Labor Organization* Self-Employed/Contractor			Form (Cash, Check, etc.) Check		
City Columbus	State G A	Zip Code 31907	M 0 3	D 1 7	Y 1 5	Amount 400.00	
Full Name of Contributor James Berry					Registration Number, if PAC		
Street Address 3458 Bexvie Ave		Employer/Occupation/Labor Organization* None/Retired			Form (Cash, Check, etc.) Cash		
City Columbus	State O H	Zip Code 43227	M 0 1	D 1 1	Y 1 5	Amount 100.00	
Full Name of Contributor Shannon Dungey					Registration Number, if PAC		
Street Address 1775 Bar Harbor Dr		Employer/Occupation/Labor Organization* Byron L Potts Attorney at Law/Paralegal			Form (Cash, Check, etc.) Cash		
City Columbus	State O H	Zip Code 43219	M 0 4	D 0 3	Y 1 5	Amount 10.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]