

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Lori Ann Feibel							
Full Name of Contributor Kimberly R. Wilson						Registration Number, if PAC	
Street Address 2404 Bexley Park Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley		State OH	Zip Code 43209		M 06	D 29	Y 13
						Amount 150.00	
Full Name of Contributor Catherine F. Kauffman						Registration Number, if PAC	
Street Address 2650 Brentwood Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley		State OH	Zip Code 43209		M 06	D 29	Y 13
						Amount 100.00	
Full Name of Contributor Kim Snook						Registration Number, if PAC	
Street Address 7363 Milton Court			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City New Albany		State OH	Zip Code 43054		M 10	D 01	Y 13
						Amount 100.00	
Full Name of Contributor Debra Kane						Registration Number, if PAC	
Street Address 181 Stanbery Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley		State OH	Zip Code 43209		M 10	D 18	Y 13
						Amount 75.00	
Full Name of Contributor Stanley G. Yenkin						Registration Number, if PAC	
Street Address 2751 Fair Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley		State OH	Zip Code 43209		M 10	D 15	Y 13
						Amount 50.00	
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	

* 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)]

Page Total \$ 475