

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Cheri Lehmann							
Full Name of Contributor James C. Henry & Frances B. Henry					Registration Number, if PAC		
Street Address 4193 Sudbrook Square W		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 0	D 8	Y 0	Amount 125.00	
Full Name of Contributor The New Albany Company LLC					Registration Number, if PAC		
Street Address 8000 Walton Parkway		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 0	D 9	Y 0	Amount 1,000.00	
Full Name of Contributor William H. Resch					Registration Number, if PAC		
Street Address Harlem Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 0	D 9	Y 0	Amount 100.00	
Full Name of Contributor Benjamin W. Hale, Jr.					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 0	D 9	Y 0	Amount 200.00	
Full Name of Contributor James S. Lambright					Registration Number, if PAC		
Street Address Pond Lily Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State	Zip Code	M 0	D 9	Y 1	Amount 50.00	
Full Name of Contributor Steve Fate					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 0	D 9	Y 1	Amount 50.00	
Full Name of Contributor Heather & J. David Goodman					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 0	D 9	Y 1	Amount 100.00	
Full Name of Contributor Philip Derrow					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 0	D 9	Y 1	Amount 200.00	

* 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 \$ 1,825.00