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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Friends of Redfern								
Full Name of Contributor			Registration Number, if PAC					
Pat Sadaro					•			
Street Address	Employer/Occur	ation/Labor Organization*				Form (Cash,	Check, etc.)	
3329 Parkbrook	Simple, sil, coccup	Employer/Occupation/Labor Organization*					Cash	
City	State	Zip Code	М	D	Y	Amount		
	OTH	43123	018	1	1111	Antomi	5.00	
Grove City Full Name of Contributor	10 111	43123		ation Nun		AC.	3.00	
			Registi	anon nun	10et, It 17	10		
John Austin	4 In 1 10					E (C)	Cl. al. ata)	
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
3362 Marsh Run Drive						Cash		
City	State	Zip Code	I M	l D	Y	Amount		
Grove Citv	OH	43123	<u> 1018</u>		1 1	<u></u>	1.00	
Full Name of Contributor			Registr	ation Nun	nber, if PA	AC		
Michelle Blackman								
Street Address	Employer/Occup	ation/Labor Organization*	<u></u>			Form (Cash, Check, etc.)		
13824 Bainwick Drive						Cash		
City	State	Zip Code	М	D	Y	Amount		
Pickerington	O H	43147	1018	1311	1 1		2.00	
Full Name of Contributor			Registr	ation Nur	iber, if PA	AC		
Sarah Jane Bueler				•		•		
Street Address	Employer/Occur	ation/Labor Organization*	-			Form (Cash,	Check, etc.)	
1570 Montcliff Drive						Check		
City	State	Zip Code	Тм	D	Y	Amount	<u> </u>	
Cumming	GA	43123		012	1 1		50.00	
Full Name of Contributor	[0] 11	43123		ation Nur		AC	30.00	
Rick Redfern			, anguar		,			
Street Address	Employer/Occum	ation/Labor Organization*				Form (Cash,	Check etc.)	
	Емроуеносир	anon ciganization				1 ' '		
3513 Lake Louise Dirve		7'. C. I.	—] D	Y	Checl	<u> </u>	
	State	Zíp Code	M	1		Amoun	100.00	
Grove City Full Name of Contributor	10 H	43123		119			100.00	
			Registra	ation Nun	iber, if PA	IC.		
Rick Redfern	I :					-		
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
3513 Lake Louise Dirve	<u></u>			,		_Check	<u> </u>	
City	State	Zip Code	M.	D _.	Y	Amount		
Grove Citv	OH	43123		23	1 1		400.00	
Full Name of Contributor			Registra	ation Nur	iber, if PA	VC.		
_ Chris Carpenter								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, C	Check, etc.)	
3535 Omaha Court						Cash		
City	State	Zip Code	М	D	Y	Amount		
Grove City	OH	43123	019	014	1 1		1.00	
Full Name of Contributor		 		ation Nurr	iber, if PA	\C		
Kath MacMillan								
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash,	Check, etc.)	
3276 Grovepark		1.374.0004man - 400. 4-B-11111111			Cash			
City	State	Zip Code	М	D	Y	Amount		
Grove City	ОІН	43123		014	111	ļ	1.00	
							2.00	

* 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 \$	560.00
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