

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee to Re-elect Fishel							
Full Name of Contributor Helene Cweren					Registration Number, if PAC		
Street Address 100 S. Merkle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 0	D 9	Y 2	Amount 25.00	
Full Name of Contributor Josh Greenberg					Registration Number, if PAC		
Street Address 36 S. Ardmore Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 0	D 9	Y 2	Amount 20.00	
Full Name of Contributor Katrina Grossman					Registration Number, if PAC		
Street Address 366 S. Stanwood Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 0	D 9	Y 2	Amount 25.00	
Full Name of Contributor Jay S. Agranoff, Trustee Agranoff Family Trust					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City	State 	Zip Code	M 1	D 0	Y 0	Amount 10.00	
Full Name of Contributor Karen McDonnell Brown					Registration Number, if PAC		
Street Address 858 S. Cassingham		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 0	D 9	Y 3	Amount 25.00	
Full Name of Contributor Robert Darwin					Registration Number, if PAC		
Street Address 185 S. Columbia Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 0	D 9	Y 3	Amount 25.00	
Full Name of Contributor Marlene Fishel					Registration Number, if PAC		
Street Address 4425 Baintree Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City University Heights	State OH	Zip Code 44118	M 1	D 0	Y 0	Amount 75.00	
Full Name of Contributor Roger Friedman					Registration Number, if PAC		
Street Address 290 N. Remington Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 0	Amount 50.00	

* 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)]