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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Friends of Joe Erb		·						
Full Name of Contributor			Registration Number, if PAC					
Michael Rosenstein				••••		-~		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
19 Woburn Abbey Avenue	Stevens and Lee/Lobbyist					Check		
City	State	Zip Code	М	D	Y	Amount		
Camp Hill	PA	17011	013	01	1 1		100.00	
Full Name of Contributor Registration Number, if PAC								
Tanya Rutner								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Chee	ck, etc.)	
157 Frankfort Sq.	Raising	/Owi	ner		Check			
City	State	Zip Code	M	D	Y	Amount		
Columbus	OH	43206	0 2			<u> </u>	100.00	
Full Name of Contributor				Registration Number, if PAC				
Jennifer Seidel								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
1774 Colhasset Lane		Ohio/Legislative L				Check		
City	State	Zip Code	M	D	Y	Amount'	100.00	
Columbus	OH	43220		2 3		~	100.00	
Full Name of Contributor			Registration Number, if PAC					
Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)							-1: ata)	
	1	,				Check		
228 Lansing St City ·	State	Lobbyist Zip Code	Γ.,	-	Τv	Amount		
Columbus	OH	43206	M 0 3	D N D	$\begin{vmatrix} \mathbf{v} \\ 1 \end{vmatrix} 1$	Attioum	100.00	
Full Name of Contributor	JOH;	43200	•		L L L iber, if PA	r	100.00	
Geoff Smith		•	Кедина		11/61, 1			
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
3578 Sunset Drive	Franklin County Auditor/I			Dire	ctor	Check		
City	State	Zip Code	М	DIIC	Y	Amount		
Columbus	OHI	43221	0/2	213	$ _{1 1}$		100.00	
Full Name of Contributor	<u>.L : </u>				ber, if PA	C	- 	
Tim Snyder								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
8140 Crossgate Ct N	Humana/Lobbyist					Check		
City	State	Zip Code	М	D	Y	Amount		
Dublin	OH	43017			1 1		100.00	
Full Name of Contributor					ber, if PA			
Vincent Squillace III								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
421 Northridge Road	Springfield Fireworks/Lob					Check		
City	State	Zip Code	M	D	Y	Amount	****	
Columbus	OH	43214	0 3	10			100.00	
Full Name of Contributor Registration Number, if PAC								
Kenny Street								
Street Address	Employer/Occupation/Labor Organization*			1 £		Form (Cash, Check, etc.)		
1933 Aschinger Blvd	Strategic Public Partners/Consultant State Zip Code M D Y			Check				
•	OH	43212		1	1	Amount	100 00	
Columbus	JOni	43212	0 2	2 3	1 1	<u> </u>	100.00	

Page Total \$ 800.00

^{*} 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)]