

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Redfern							
Full Name of Contributor Pat Sadaro					Registration Number, if PAC		
Street Address 3329 Parkbrook		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 3 1 1	Amount 5.00	
Full Name of Contributor John Austin					Registration Number, if PAC		
Street Address 3362 Marsh Run Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 3 1 1	Amount 1.00	
Full Name of Contributor Ed and Michelle Blackman					Registration Number, if PAC		
Street Address 13824 Bainwick Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Pickerington	State O H	Zip Code 43147	M 0	D 8	Y 3 1 1	Amount 2.00	
Full Name of Contributor Sarah Jane Bueler					Registration Number, if PAC		
Street Address 1570 Montcliff Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Cumming	State G A	Zip Code 43123	M 0	D 9	Y 0 2 1	Amount 50.00	
Full Name of Contributor Rick Redfern					Registration Number, if PAC		
Street Address 3513 Lake Louise Dirve		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 1 9 1	Amount 100.00	
Full Name of Contributor Rick Redfern					Registration Number, if PAC		
Street Address 3513 Lake Louise Dirve		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 2 3 1	Amount 400.00	
Full Name of Contributor Chris Carpenter					Registration Number, if PAC		
Street Address 3535 Omaha Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 0 4 1	Amount 1.00	
Full Name of Contributor Kath MacMillan					Registration Number, if PAC		
Street Address 3276 Grovepark		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 0 4 1	Amount 1.00	

* 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**