

## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee							
Full Name of Contributor D. Wesley Newhouse						Registration Number, if PAC	
Street Address 2674 Henthorn Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington		State OH	Zip Code 43221-3214	M 10	D 22	Y 2012	Amount \$35.00
Full Name of Contributor David Hank Mylander						Registration Number, if PAC	
Street Address 635 Mallard Crossing Way			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus		State OH	Zip Code 43215-7030	M 11	D 06	Y 2012	Amount \$100.00
Full Name of Contributor Marilyn Pritchett						Registration Number, if PAC	
Street Address 4185 Chadbourne Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus		State OH	Zip Code 43220-3917	M 10	D 26	Y 2012	Amount \$75.00
Full Name of Contributor Mary Lynn Readey						Registration Number, if PAC	
Street Address 7677 Riverside Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Dublin		State OH	Zip Code 43016-8241	M 10	D 21	Y 2012	Amount \$250.00
Full Name of Contributor Nisource Inc PAC						Registration Number, if PAC C00051979	
Street Address 200 Civic Center Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215	M 12	D 06	Y 2012	Amount \$500.00

\* 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)]