

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full UA for Foulk									
Full Name of Contributor Todd Fuhrman						Registration Number, if PAC			
Street Address 1593 College Hill Drive				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Upper Arlington		State OH		Zip Code 43221		M 1	D 0	Y 1	Amount \$100.00
Full Name of Contributor Lawrence J. OBrien						Registration Number, if PAC			
Street Address 2505 Coventry Road				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Upper Arlington		State OH		Zip Code 43221		M 1	D 0	Y 2	Amount \$200.00
Full Name of Contributor Randall Scholl						Registration Number, if PAC			
Street Address 1390 Stoneygate Lane				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Upper Arlington		State OH		Zip Code 43221		M 1	D 0	Y 3	Amount \$50.00
Full Name of Contributor Patricia Brown						Registration Number, if PAC			
Street Address 1916 Harwitch Road				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal	
City Upper Arlington		State OH		Zip Code 43221		M 1	D 1	Y 0	Amount \$250.00
Full Name of Contributor Shari Mason						Registration Number, if PAC			
Street Address 4586 Lanercost Way				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal	
City Upper Arlington		State OH		Zip Code 43220		M 1	D 1	Y 0	Amount \$25.00
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M	D	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M	D	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M	D	Y	Amount

* 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 also appear. [R.C. 3517.10(B)(4)]