

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Debbie Brannan									
Full Name of Contributor Susan Gerlach Douglass						Registration Number, if PAC			
Street Address 1115 Urlin Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check			
City Columbus, OH		State OH		Zip Code 43212		M 08	D 30	Y 11	Amount 100.00
Full Name of Contributor Gregor Berning						Registration Number, if PAC			
Street Address 1105 Lincoln Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check			
City Columbus		State OH		Zip Code 43212		M 08	D 07	Y 11	Amount 100.00
Full Name of Contributor Melissa Barr Snider						Registration Number, if PAC			
Street Address 1342 Lincoln Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City Columbus		State OH		Zip Code 43212		M 08	D 31	Y 11	Amount 25.00
Full Name of Contributor Stephanie A. Brett						Registration Number, if PAC			
Street Address 1315 Cambridge Blvd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check			
City Columbus		State OH		Zip Code 43212		M 09	D 07	Y 11	Amount 50.00
Full Name of Contributor Jana Lee Douglass						Registration Number, if PAC			
Street Address 1115 Urlin Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check			
City Columbus		State OH		Zip Code 43212		M 09	D 05	Y 11	Amount 100.00
Full Name of Contributor Nancy Moore						Registration Number, if PAC			
Street Address 1199 Glenn Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check			
City Columbus		State OH		Zip Code 43212		M 09	D 14	Y 11	Amount 50.00
Full Name of Contributor Renée L. Heydinger						Registration Number, if PAC			
Street Address 1216 W. First Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City Columbus		State OH		Zip Code 43212		M 09	D 12	Y 11	Amount 50.00
Full Name of Contributor Carol T. Davis						Registration Number, if PAC			
Street Address 1935 W. First Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check			
City Columbus		State OH		Zip Code 43212		M 09	D 15	Y 11	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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$ 525.00