

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of McGivern									
Full Name of Contributor David E. Burke						Registration Number, if PAC			
Street Address 860 Wedgewood Drive			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Marysville		State O H		Zip Code 43040		M D Y 1 0 1 3 0 9		Amount 50.00	
Full Name of Contributor David B. Amerine						Registration Number, if PAC			
Street Address 4965 Britton Farms Court			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Hilliard		State O H		Zip Code 43026		M D Y 1 0 1 3 0 9		Amount 50.00	
Full Name of Contributor Lisa P. Hackley						Registration Number, if PAC			
Street Address 5356 Ambrosia Avenue			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43235		M D Y 1 0 1 3 0 9		Amount 50.00	
Full Name of Contributor Yvonne Lesicko						Registration Number, if PAC			
Street Address 1168 Rockport Court			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43235		M D Y 1 0 1 3 0 9		Amount 50.00	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)		
City		State		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		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		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		Zip Code		M D Y		Amount	

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 200.00