

Statement of Contributions Received

Prescribed by Secretary of State 03/05

| | | | | | | | |
|--|--|--------------------|--|--|---------------|--|---------------|
| Name of Committee in Full Brennan for Mayor | | | | | | | |
| Full Name of Contributor Brenda Willhite | | | | | | Registration Number, if PAC | |
| Street Address 435 Stanbery Dr. | | | Employer/Occupation/Labor Organization * | | | Form (Cash, Check, etc.) Check | |
| City Columbus | | State OH | Zip Code 43209 | | M 0 | D 9 | Y 0 |
| | | | | | | Amount \$20.00 | |
| Full Name of Contributor Kay Anne Helman | | | | | | Registration Number, if PAC | |
| Street Address 63 S. Cassady Ave. | | | Employer/Occupation/Labor Organization * | | | Form (Cash, Check, etc.) Check | |
| City Columbus | | State OH | Zip Code 43209 | | M 0 | D 9 | Y 0 |
| | | | | | | Amount \$20.00 | |
| Full Name of Contributor Michael Simpson | | | | | | Registration Number, if PAC | |
| Street Address 605 S. Front St. Suite 200 | | | Employer/Occupation/Labor Organization * | | | Form (Cash, Check, etc.) Check | |
| City Columbus | | State OH | Zip Code 43215 | | M 0 | D 9 | Y 0 |
| | | | | | | Amount \$20.00 | |
| Full Name of Contributor David and Lorrie Valinsky | | | | | | Registration Number, if PAC | |
| Street Address 344 S. Merkle Rd. | | | Employer/Occupation/Labor Organization * | | | Form (Cash, Check, etc.) Check | |
| City Columbus | | State OH | Zip Code 43209 | | M 0 | D 9 | Y 0 |
| | | | | | | Amount \$20.00 | |
| Full Name of Contributor Joseph and Anne Johnson Myers | | | | | | Registration Number, if PAC | |
| Street Address 224 S. Remington Rd. | | | Employer/Occupation/Labor Organization * | | | Form (Cash, Check, etc.) Check | |
| City Bexley | | State OH | Zip Code 43209 | | M 0 | D 9 | Y 0 |
| | | | | | | Amount \$20.00 | |
| Full Name of Contributor M. Anthony and Kristi Tanner | | | | | | Registration Number, if PAC | |
| Street Address 300 Eastmoor Blvd. | | | Employer/Occupation/Labor Organization * | | | Form (Cash, Check, etc.) Check | |
| City Columbus | | State OH | Zip Code 43209 | | M 0 | D 9 | Y 0 |
| | | | | | | Amount \$20.00 | |
| Full Name of Contributor George and Barbara Wainer | | | | | | Registration Number, if PAC | |
| Street Address 175 S. Cassady Ave. | | | Employer/Occupation/Labor Organization * | | | Form (Cash, Check, etc.) Check | |
| City Bexley | | State OH | Zip Code 43209 | | M 0 | D 9 | Y 0 |
| | | | | | | Amount \$20.00 | |
| Full Name of Contributor Kevin and Lauren Seckel | | | | | | Registration Number, if PAC | |
| Street Address 906 S. Remington Rd. | | | Employer/Occupation/Labor Organization * | | | Form (Cash, Check, etc.) Check | |
| City Bexley | | State OH | Zip Code 43209 | | M 0 | D 9 | Y 0 |
| | | | | | | Amount \$20.00 | |

* 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 **\$160.00**