

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Neal Whitman					
Full Name of Contributor Carl Haeger				Registration Number, if PAC	
Street Address 7762 Slate Ridge Blvd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online Donation	
City Reynoldsburg	State OH <input checked="" type="checkbox"/>	Zip Code 43068	M 0	D 7	Y 0 2 1 5
				Amount \$25.00	
Full Name of Contributor Glen Whitman				Registration Number, if PAC	
Street Address 215 1/2 S. Detroit St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online Donation	
City Los Angeles	State CA <input checked="" type="checkbox"/>	Zip Code 90036	M 0	D 7	Y 0 2 1 5
				Amount \$200.00	
Full Name of Contributor Carah Casler				Registration Number, if PAC	
Street Address 930 Enfield Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43209	M 0	D 7	Y 0 2 1 5
				Amount \$50.00	
Full Name of Contributor Tori Begeny				Registration Number, if PAC	
Street Address 8840 Kingsley Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH <input checked="" type="checkbox"/>	Zip Code 43068	M 0	D 7	Y 0 7 1 5
				Amount \$20.00	
Full Name of Contributor Margaret Mary Luzny				Registration Number, if PAC	
Street Address 8742 Firstgate Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH <input checked="" type="checkbox"/>	Zip Code 43068	M 0	D 7	Y 1 0 1 5
				Amount \$25.00	
Full Name of Contributor Christine Smith				Registration Number, if PAC	
Street Address 8334 Priestley Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online Donation	
City Reynoldsburg	State OH <input checked="" type="checkbox"/>	Zip Code 43068	M 0	D 7	Y 2 5 1 5
				Amount \$30.00	
Full Name of Contributor Erin Ross				Registration Number, if PAC	
Street Address 7742 Priestley Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH <input checked="" type="checkbox"/>	Zip Code 43068	M 0	D 8	Y 0 8 1 5
				Amount \$25.00	
Full Name of Contributor Virginia Green				Registration Number, if PAC	
Street Address 6508 Flaxton Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash	
City Reynoldsburg	State OH <input checked="" type="checkbox"/>	Zip Code 43068	M 0	D 8	Y 0 8 1 5
				Amount \$40.00	

* 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)]