

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Redfern									
Full Name of Contributor Nancy Meeks						Registration Number, if PAC			
Street Address 491 Scioto Meadows			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00		
Full Name of Contributor Kevin Stenerson						Registration Number, if PAC			
Street Address 691 Scioto Meadow Blvd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00		
Full Name of Contributor Chris Poole						Registration Number, if PAC			
Street Address 6365 Ewen Circle			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00		
Full Name of Contributor Melissa Kilgore						Registration Number, if PAC			
Street Address 552 W. River Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00		
Full Name of Contributor Tim Berlekamp						Registration Number, if PAC			
Street Address 712 Scioto Meadows Blvd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 5.00		
Full Name of Contributor Laura Teaford						Registration Number, if PAC			
Street Address 450 Scioto Meadows			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00		
Full Name of Contributor Tom Morgan						Registration Number, if PAC			
Street Address 2372 Ziner Circle S			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 2.00		
Full Name of Contributor Lorraine Creebaum						Registration Number, if PAC			
Street Address 2291 Ziner Circle S.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City	State O	H H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00		

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

Page Total \$ **13.00**