

Statement of Contributions Received

Prescribed by Secretary of State 03/05

| | | | | | | | | | |
|--|--|------------------------|---|--|----------------|----------------|--|----------------------------|--|
| Name of Committee in Full New Albany for Kids | | | | | | | | | |
| Full Name of Contributor Jim Cornal Corna-Kokosing | | | | | | | Registration Number, if PAC | | |
| Street Address 6235 Westerville Rd | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Westerville | | State OH | Zip Code 43081 | | M 11 | D 06 | Y 14 | Amount \$5000.00 | |
| Full Name of Contributor Bricker & Eckler / State PAC | | | | | | | Registration Number, if PAC #04821 | | |
| Street Address 100 S Third St #04821 | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | | State OH | Zip Code 43215 | | M 11 | D 06 | Y 14 | Amount \$575.00 | |
| Full Name of Contributor Terracon (David Gaboury) | | | | | | | Registration Number, if PAC | | |
| Street Address 18001 W 106th St, Suite 300 | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Olathe | | State Kansas | Zip Code 66061 | | M 11 | D 06 | Y 14 | Amount \$275.00 | |
| Full Name of Contributor Squire Sanders / PAC (David Goodman, Chair) | | | | | | | Registration Number, if PAC #C08444935 | | |
| Street Address 1200 19th St NW Ste 300 | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Washington | | State DC | Zip Code 20036 | | M 11 | D 04 | Y 14 | Amount \$350.00 | |
| Full Name of Contributor Security Voice, Inc. (Bob McCurdy) | | | | | | | Registration Number, if PAC | | |
| Street Address 3496 Snouffer Rd, Ste 225 | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | | State OH | Zip Code 43235 | | M 11 | D 06 | Y 14 | Amount \$100.00 | |
| Full Name of Contributor Tom Clancy / Alert Security Consulting | | | | | | | Registration Number, if PAC | | |
| Street Address 7585 N. Goodrich Square | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City New Albany | | State OH | Zip Code 43054 | | M 11 | D 02 | Y 14 | Amount \$200.00 | |
| Full Name of Contributor WORKS International (Steve Temming) | | | | | | | Registration Number, if PAC | | |
| Street Address 2010 Madison Road | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Cincinnati | | State OH | Zip Code 45208 | | M 11 | D 03 | Y 14 | Amount \$150.00 | |
| Full Name of Contributor Ruth Bank | | | | | | | Registration Number, if PAC | | |
| Street Address 7834 Jonell Square | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City New Albany | | State OH | Zip Code 43054 | | M 11 | D 02 | Y 14 | Amount \$100.00 | |

* 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)]