

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee to Elect DJ Falcoski							
Full Name of Contributor Ervin, Amy					Registration Number, if PAC		
Street Address 2979 Landen Farms Rd E		Employer/Occupation/Labor Organization* Attorneys			Form (Cash, Check, etc.) Check		
City Hilliard	State O	Zip Code H 43026	M 1	D 0	Y 0	Amount 75.00	
Full Name of Contributor Lupiba, Jennifer Imes					Registration Number, if PAC		
Street Address 1730 King Avenue Apt D		Employer/Occupation/Labor Organization* Accunet/Director of Marketing			Form (Cash, Check, etc.) Check		
City Columbus	State O	Zip Code H 43212	M 1	D 0	Y 7	Amount 50.00	
Full Name of Contributor Contributions from Form 31-E					Registration Number, if PAC		
Street Address Du Amici Event		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M 1	D 0	Y 1	Amount 500.00	
Full Name of Contributor Contributions from Form 31-E					Registration Number, if PAC		
Street Address Garden Party Event		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M 0	D 9	Y 2	Amount 1,225.00	
Full Name of Contributor Contribbtions from Form 31-E					Registration Number, if PAC		
Street Address House Wines Event		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M 0	D 9	Y 0	Amount 1,045.00	
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	

* 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 \$ 2,895.00