

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Redfern							
Full Name of Contributor Ron Hall					Registration Number, if PAC		
Street Address 5741 Cypress Hollow Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 1	Amount 1.00	
Full Name of Contributor Toby Jenkins					Registration Number, if PAC		
Street Address 5750 Birch Bark Circle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 1	Amount 1.00	
Full Name of Contributor Karen Macioce					Registration Number, if PAC		
Street Address 2197 Birch Bark Trail		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 1	Amount 1.00	
Full Name of Contributor Bob Borgman					Registration Number, if PAC		
Street Address 2348 Quail Meadow Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 1	Amount 1.00	
Full Name of Contributor Tom Walters					Registration Number, if PAC		
Street Address 5832 Birch Bark Circle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 1	Amount 2.00	
Full Name of Contributor Ron Lucas					Registration Number, if PAC		
Street Address 2458 Quail Meadow Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 1	Amount 1.00	
Full Name of Contributor Karen Fahrion					Registration Number, if PAC		
Street Address 2450 Quail Meadow		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 1	Amount 1.00	
Full Name of Contributor Kevin Boll					Registration Number, if PAC		
Street Address 2424 Quail Meadow Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 8	Y 1	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 \$ **9.00**