

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus													
Full Name of Contributor Ann E. Schiele						Registration Number, if PAC							
Street Address 533 Bramblewood Court			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check						
City Westerville		State O H		Zip Code 43081		M 0 3		D 0 2		Y 0 8		Amount 50.00	
Full Name of Contributor Neal P Cavanaugh						Registration Number, if PAC							
Street Address 4542 Arlingate Dr. E.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check						
City Upper Arlington		State O H		Zip Code 43221		M 0 3		D 0 2		Y 0 8		Amount 100.00	
Full Name of Contributor Richard P. Murphy						Registration Number, if PAC							
Street Address 2591 Haverford Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check						
City Upper Arlington		State O H		Zip Code 43220		M 0 3		D 0 2		Y 0 8		Amount 500.00	
Full Name of Contributor Williams Living Trust, Jean S. Williams TR						Registration Number, if PAC							
Street Address 6285 Ballmer Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check						
City Canal Winchester		State O H		Zip Code 43110		M 0 3		D 0 3		Y 0 8		Amount 500.00	
Full Name of Contributor Dennis J. Zack						Registration Number, if PAC							
Street Address 2 Keswick Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check						
City New Albany		State O H		Zip Code 43054		M 0 3		D 0 3		Y 0 8		Amount 300.00	
Full Name of Contributor Babette Gorman						Registration Number, if PAC							
Street Address 353 N Drexel Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) on line						
City Columbus		State O H		Zip Code 43209		M 0 2		D 2 7		Y 0 8		Amount 100.00	
Full Name of Contributor Jennifer Flint						Registration Number, if PAC							
Street Address 6908 Perry Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) on line						
City Worthington		State O H		Zip Code 43085		M 0 2		D 2 7		Y 0 8		Amount 100.00	
Full Name of Contributor Thom & Jane McCain						Registration Number, if PAC							
Street Address 146 Glenmont			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) on line						
City Columbus		State O H		Zip Code 43214		M 0 2		D 2 7		Y 0 8		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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 1,750.00