31-A				
R.C.	3517.10			

Statement of Contributions Received

	1
Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full										
Full Name of Contributor FRICA DONAHOE	nber, if P	AC								
Full Name of Contributor ERICA DONAHOE Street Address 8371 BWUhymu Rd City	Employer/Occupation/Labor Organization* NAPLS					Form (Cash, Check, etc.)				
Wister ville	State OH	Zip Code 43081	M	D	Y	Amount 10 - 00				
Full Name of Contributor Fau E Se / Street Address				Registration Number, if PAC						
Street Address 3269 Wind Or	Employer/Occupation/Labor Organization* MAPL 5 State Zip Code					Form (Cash, Sheck, etc.)				
City Louis Center	State OH	Zip Code 43535	М	D	Y	Amount 5.00				
		Registration Number, if PAC								
Full Name of Contributor SUAN WOODMANSEE Street Address 7256 Hopewell Ct.	Employer/Occupan	ion/Labor Organization*				Form (Cash, Check, etc.)				
City DUBLIN	State	Zip Code 43017	М	D	Y	Amount 20.00				
Full Name of Contributor SANDY REED Street Address			Registra	tion Nun	aber, if Pa	<u> </u>				
Street Address 2647 PATTERSON RP SW	i i <i>KJA</i>	ion/Labor Organization* PLS				Form (Cash, Check, etc.)				
PATASKALA	State, OH	Zip Code 43 0 \$ 2	М	D	Y	Amount GOOD				
Full Name of Contributor 12 yar 1-too bler Street Address		Registra	tion Nun	nber, if Pa	AC					
2533 Bristel Rd.	Employer/Occupati				Form (Cash, Check, etc.)					
Otty Upper Arlington	State OH	Zip Code 43221	М	D	Y	Cash Amount \$5				
Full Name of Contributor Meli 5 5 a Stult? Street Address Employer/Occupation/Labor Organization*					Registration Number, if PAC					
US Forbidden Lakes Ct.	Employer/Occupati	ion/Labor Organization*				Form (Cash, Check, etc.)				
Johnstown	State	Zip Code 43031	М	D	Y	Amount				
Full Name of Contributor Patricia Ramall					Registration Number, if PAC					
Street Address 58 90 Winslow Ct.	Employer/Occupat	ion/Labor Organization*		·	·•	Form (Cash, Check, etc.)				
Dublin	Off	Zip Code	M	D	Y	5.00				
Full Name of Contributor Jeeyouy Crebhut Street Address 1256 Venetian Ct. City Gahanna			Registra	tion Nun	nber, if P					
256 Venetian Ct. Employer/Occupation/Labor Organization* 256 Venetian Ct. Teacher at NAPLS			12-	T 74	1 52	Form (Cash, Check, etc.)				
Gahanna	State	Zip Code 4323 s	М	D	Y	Amount 5, 00				

Page Total \$ 6000

^{*} 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)]