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Statement of Contributions Received

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Prescribed by Secretary of State 03/05

| Name of Committee in Full Friends of Jeremy Herman | | : | | | | |
|---|---------------------------|--|--|-----------------------------|--|--|
| Full Name of Contributor Tom Russell | | l , | Registration Number, if | Registration Number, if PAC | | |
| Street Address 171 Heischman Ave | pation/Labor Organization | | Form (Cash, Check, etc.) online payment | | | |
| City Worthington | State OH | Zíp Code 43085 | 1 1 D 2 1 1 | Amount \$25.00 | | |
| Full Name of Contributor | | | Registration Number, if | PAC | | |
| Street Address | Етрюует/Осси | pation/Labor Organization | | Form (Cash, Check, etc.) | | |
| City | State OH | Zip Code | M D Y | Amount | | |
| Full Name of Contributor | | | Registration Number, if | PAC | | |
| Street Address | Employer/Occu | pation/Labor Organization* | | Form (Cash, Check, etc.) | | |
| City . | State OH | Zip Code | M D Y | Amount | | |
| Full Name of Contributor | | | Registration Number, i | f PAC . | | |
| Street Address | Employer/Occu | npation/Labor Organization | | Form (Cash, Check, etc.) | | |
| City | State OH | Zip Code | M D Y | Amount | | |
| Full Name of Contributor | | | Registration Number, i | f PAC | | |
| Street Address | Employer/Occu | upation/Labor Organization | | Form (Cash, Check, etc.) | | |
| City | State OH | Zip Code | M D Y | Amount | | |
| Full Name of Contributor | | | Registration Number, | FPAC | | |
| Street Address | Employer/Occ | upation/Labor Organization | | Form (Cash, Check, etc.) | | |
| City | State OH | Zip Code | M D Y | Amount | | |
| Full Name of Contributor | Registration Number, | Registration Number, if PAC | | | | |
| Street Address | Employer/Occ | cupation/Labor Organization | | Form (Cash, Check, etc.) | | |
| City | State OH | Zip Code | M D Y | Amount | | |
| Full Name of Contributor | | | Registration Number, | if PAC | | |
| Street Address | Employer/Occ | Employer/Occupation/Labor Organization | | | | |
| City | State OH | Zip Code | M D | Amount | | |
| | | | | | | |

Page Total \$25.00

^{*} 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)]