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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full		<u></u>			
Klein Committee					
Full Name of Contributor			Registration Number,	Registration Number, if PAC	
Nemann Law Offices LLC					
Street Address	Employe	r/Occupation/Labor	Organization*	Form (Cash, Check, etc.)	
1243 S High St				Check	
City	State	Zip Code	Date	Amount	
Columbus	ОН	43206	02/28/2017	\$500.00	
full Name of Contributor			Registration Number, if PAC		
Sean Mentel					
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)		
58 N 4th Street	Kooperman Mentel Ferguson Yaross, Ltd./Attorney		Credit		
City	State	Zip Code	Date	Amount	
Columbus	ОН	43215	03/01/2017	\$5,000.00	
Full Name of Contributor			Registration Number,	if PAC	
N/A			N/A		
Street Address	Employer/Occupation/Labor Organization*		Organization*	Form (Cash, Check, etc.)	
N/A	N/A		<u>.</u>	N/A	
City	State	Zip Code	Date	Amount	
N/A	N/A	N/A	N/A	\$0.00	
Full Name of Contributor			Registration Number,	Registration Number, if PAC	
N/A			N/A		
Street Address	Employe	r/Occupation/Labor	Organization*	Form (Cash, Check, etc.)	
N/A	N/A			N/A	
City	State	Zip Code	Date	Amount	
N/A	N/A	N/A	N/A	\$0.00	
Full Name of Contributor	Registration Number,	if PAC			
N/A			N/A		
Street Address	Employer/Occupation/Labor O		Organization*	Form (Cash, Check, etc.)	
N/A	N/A			N/A	
City	State	Zip Code	Date	Amount	
N/A	N/A	N/A	N/A	\$ 0.00	
Full Name of Contributor		Registration Number, if PAC			
N/A			N/A	N/A	
Street Address	ress Employer/Occupation/Labor Org		Organization*	Form (Cash, Check, etc.)	
N/A	N/A			N/A	
City	State	Zip Code	Date	Amount	
N/A	N/A	N/A	N/A	\$0.00	
Full Name of Contributor		Registration Number,	Registration Number, if PAC		
N/A			N/A		
Street Address	Employe	r/Occupation/Labor	Organization*	Form (Cash, Check, etc.)	
N/A	N/A			N/A	
City	State	Zip Code	Date	Amount	
N/A	N/A	N/A	N/A	\$0.00	
Full Name of Contributor		Registration Number,	if PAC		
N/A N/A					
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)		
N/A	N/A			N/A	
City	State	Zip Code	Date	Amount	
N/A	N/A	N/A	l N/A	\$0.00	

Page Total: \$5,500.00

^{*} 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)]