

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Charlie Myers							
Full Name of Contributor Randell Trammell					Registration Number, if PAC		
Street Address 16 Wood Forest Drive SW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Cartersville	State GA <input checked="" type="checkbox"/>	Zip Code 30120	M 0	D 2	Y 0	Amount \$100.00	
Full Name of Contributor Drew Caldwell					Registration Number, if PAC		
Street Address 293 State Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Albany	State NY <input checked="" type="checkbox"/>	Zip Code 12210	M 0	D 2	Y 0	Amount \$25.00	
Full Name of Contributor David DiYanni					Registration Number, if PAC		
Street Address 15131 Palmer Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Etna	State OH <input checked="" type="checkbox"/>	Zip Code 43068	M 0	D 2	Y 1	Amount \$100.00	
Full Name of Contributor Zachary Zugelder					Registration Number, if PAC		
Street Address 3113 Wellington Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Dayton	State OH <input checked="" type="checkbox"/>	Zip Code 45410	M 0	D 2	Y 1	Amount \$25.00	
Full Name of Contributor Dawn Burmahl					Registration Number, if PAC		
Street Address 21043 Ridgeview		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Monticello	State IA <input checked="" type="checkbox"/>	Zip Code 52310	M 0	D 2	Y 1	Amount \$25.00	
Full Name of Contributor Scott Cunningham					Registration Number, if PAC		
Street Address 1000 New Jersey Ave, SE #407		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Washington	State DC <input checked="" type="checkbox"/>	Zip Code 20003	M 0	D 2	Y 1	Amount \$25.00	
Full Name of Contributor Mary Anne Mullenax					Registration Number, if PAC		
Street Address 15 Pecan Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Farmington	State WV <input checked="" type="checkbox"/>	Zip Code 26571	M 0	D 2	Y 1	Amount \$25.00	
Full Name of Contributor Sean Dunn					Registration Number, if PAC		
Street Address 6057 Dunbar Way 6057 Johnston Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City New Albany	State OH <input checked="" type="checkbox"/>	Zip Code 43054	M 0	D 2	Y 1	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 also appear. [R.C. 3517.10(B)(4)]