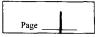
Statement of Contributions Received



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	GA 🔽	Zip Code 30120	0 2 0 7 1 7	Amount \$100.00
Full Name of Contributor Drew Caldwell Registration 1			Registration Number, if Pa	AC
Street Address 293 State Street	Employer/Occupati	ion/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Albany	NY 🔽	Zip Code 12210	0 2 0 8 1 7	Amount \$25.00
Full Name of Contributor David DiYanni Registration Number, if PAC				
Street Address 15131 Palmer Road	Employer/Occupati	ion/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Etna	State OH	Zip Code 43068	0 2 1 0 1 7	Amount \$100.00
Full Name of Contributor Zachary Zugelder Registration Number, if PAC				AC
Street Address 3113 Wellington Drive	Employer/Occupati	ion/Labor Organization*		Form (Cash, Check, etc.) Credit Card
^{City} Dayton	State OH	Zip Code 45410	0 2 1 0 1 7	Amount \$2 5.00
Full Name of Contributor Registration Number, if Parameter Registration Nu				AC
Street Address 21043 Ridgeview	Employer/Occupati	ion/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Monticello	IA 🔽	Zip Code 52310	0 2 1 1 1 7	Amount \$25.00
Full Name of Contributor Scott Cunningham Registration Number, if P.				AC
Street Address 1000 New Jersey Ave, SE #407	Employer/Occupati	ion/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Washington	DC 🔽	Zip Code 20003	M D Y 0 2 1 4 1 7	Amount \$25.00
Full Name of Contributor Mary Anne Mullenax				AC
Street Address 15 Pecan Street	Employer/Occupati	ion/Labor Organization*	-	Form (Cash, Check, etc.) Credit Card
City Farmington	State WV 🔽	Zip Code 26571	M D Y 0 2 1 4 1 7	Amount \$25.00
Full Name of Contributor Sean Dunn Registration Number, if PAC				
Street Address 8057 Dunction Ways 6057 Sohnstoned		ion/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City New Albany	State OH	Zip Code 43054	M D Y 7	Amount \$100.00

Page Total \$425.00

^{*} 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)]