

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full FRIENDS OF BASLER							
Full Name of Contributor LUCIA ELY					Registration Number, if PAC		
Street Address 2943 Truman Ct.		Employer/Occupation/Labor Organization* Secretary			Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 10	D 12	Y 11	Amount 50.00 ✓	
Full Name of Contributor LISA HARTIG					Registration Number, if PAC		
Street Address 6475 Strathaven Ct W		Employer/Occupation/Labor Organization* Pharmacist			Form (Cash, Check, etc.) Check		
City WORTHINGTON	State OH	Zip Code 43085	M 10	D 18	Y 11	Amount 25.00 ✓	
Full Name of Contributor WK YOUNG - CPA					Registration Number, if PAC		
Street Address 4380 Harrisburg Pike		Employer/Occupation/Labor Organization* Accountant			Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 10	D 18	Y 11	Amount 100.00 ✓	
Full Name of Contributor Jennifer KELLER BELT					Registration Number, if PAC		
Street Address 2574 Stanberry Dr.		Employer/Occupation/Labor Organization* SELF-EMPLOYED - ARTIST			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43206-1062	M 10	D 18	Y 11	Amount 50.00 ✓	
Full Name of Contributor Grove City Area Republican Club					Registration Number, if PAC		
Street Address 5580 Meadow Grove		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 10	D 13	Y 11	Amount 300.00 ✓	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]

Page Total \$ **525.00**