Statement of Contributions Received

Prescribed by Secretary of State 3/05

						<u> </u>	
Name of Committee in Full							
Friends of Redfern		<u> </u>					
Full Name of Contributor	Registration Number, if			ber, if PA	VC		
Jennifer Faught							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
6384 Seneca Way						Cash _	
City	State	Zip Code	М	D	Y	Amount	
Grove City	O H	43123	10	08	1 1		1.00
Full Name of Contributor		•	Registra	tion Num	ber, if PA	vc	
Otis Pritchard							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
6269 Beaver Lake Drive						Cash	
City	State	Zip Code	M	D	Y	Amount	
Grove City	O H	43123	1 0	0 9	1 1	_	2.00
Full Name of Contributor			Registra	tion Num	ber, if PA	AC .	
Leslie and Richie Cohen-Smith							
Street Address	Employer/Occup	nation/Labor Organization*				Form (Cash, Check, etc.)	
6289 Beaver Lake Drive						Cash	
City	State	Zip Code	М	D	Y	Amount	
Grove City	OH	43123	1 0	0 9	1 1	<u> </u>	20.00
Full Name of Contributor			Registra	tion Nur	ber, if PA	AC	
Richard Mickelson							
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Che	eck, etc.)
6243 Beaver Lake Drive	· ·				Cash		
City	State	Zip Code	М	D	Y	Amount	
Grove City	O H	43123	1 0	0 9	1 1		1.00
Full Name of Contributor			Registra	tion Num	ber, if P/	AC .	
lerry McKown			l				
Street Address	Employer/Occup	oation/Labor Organization*	,			Form (Cash, Che	ck, etc.)
6124 Cataba	j					Cash	
City	State	Zip Code	М	D	Y	Amount	
Grove City	O H	43123	1 0	1 0	1 1		1.00
Full Name of Contributor			Registra	tion Num	ber, if PA	AC .	
Scott Harr							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
6216 Beaver Laek	1					Cash	
City	State	Zip Code	М	D	Y	Amount	
Grove City	$O \mid H$	43123	1 0	$1 \mid 0$	1 1	!	1.00
Full Name of Contributor			Registra	tion Nur	iber, if PA	AC	<u> </u>
Greg Cashdollar							
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Che	eck, etc.)
1758 Hawthorne Pkwv				Cash			
City	State	Zip Code	М	D	Y	Amount	
Grove City	O H	43123	1 0	1 0	1 1		2.00
Full Name of Contributor		Ţ	Registra	ition Num	iber, if Pa	AC	
Doug Stonerock							
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Che	eck, etc.)
6344 Beaver Laek	[Cash	
City	State	Zip Code	М	D	Y	Amount	
Grove City	O H	43123	1 0	110	1 1		1.00

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$	29.00