

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Marilyn Brown									
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 Bernice Silverstein						Registration Number, if PAC			
Street Address 1198 Ranchland Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Ck		
City Mayfield Hts.			State O H	Zip Code 44124	M 0 5	D 1 3	Y 0 6	Amount 20.00	
Full Name of Contributor Carpenters Local Union #200 PCE, Entity #10288						Registration Number, if PAC			
Street Address 1545 Alum Creek Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Ck		
City Columbus			State O H	Zip Code 43209	M 0 6	D 2 0	Y 0 6	Amount 2,000.00	
Full Name of Contributor Walter J. Gerhardstein Jr.						Registration Number, if PAC			
Street Address 7100 N. High St., Suite 307			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Ck		
City Worthington			State O H	Zip Code 43085	M 0 6	D 3 0	Y 0 6	Amount 100.00	
Full Name of Contributor Donna K. Laidlaw						Registration Number, if PAC			
Street Address 265 S. Parkview Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Ck		
City Columbus			State O H	Zip Code 43209	M 0 7	D 0 5	Y 0 6	Amount 100.00	
Full Name of Contributor Sheryl Williams						Registration Number, if PAC			
Street Address 658 Bugle Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Ck		
City Gahanna			State O H	Zip Code 43230	M 0 7	D 0 5	Y 0 6	Amount 25.00	
Full Name of Contributor John E. Snyder						Registration Number, if PAC			
Street Address 794 S. 6th			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Ck		
City Columbus			State O H	Zip Code 43206	M 0 7	D 1 0	Y 0 6	Amount 50.00	
Full Name of Contributor Jane L. Miller						Registration Number, if PAC			
Street Address 1198 Sanctuary Place			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Ck		
City Gahanna			State O H	Zip Code 43230	M 0 7	D 0 7	Y 0 6	Amount 50.00	

* 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 \$ 2,345.00