Statement of Contributions Received

Prescribed by Secretary of State 3/05

N. 00							
Name of Committee in Full							
Friends of Jeni Quesenberry Full Name of Contributor			In	4' N	L CDA	0	
			Registra	ition Num	ber, it PA	C	
Jeni Quesenberry	F 1 /0					F (0 1 G) 1 .	
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc	\$.)
949 Lancaster Ave	g	In: a i	1			Check	
City Page 1 deleges	State H	Zip Code	M	D	Y	Amount	E 00
Reynoldsburg Full Name of Contributor	OH	43068	0 3		1 7		5.00
			Kegistra	ition Num	ber, ii PA	C	
Franklin County Democratic Wor		ation / about Ourseinstians				Farm (Cash Chash at	-)
	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
1029 Northfield Place N City	Ctata	7:- 0-1-	Lv	I D	1 1/	Check	
	State H	Zip Code	M	D	Y	Amount	0.00
Reynoldsburg	Оп	43068	0 4	2 4	1 7		0.00
Full Name of Contributor Registration Number, if PAC							
John (JP) Sterns Street Address	F1/O	-Ai/I -b OiAi#				Farm (Cash Charle at	- \
	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)	
6992 Nocturne Rd N	Chata	7:- 0.1-		I D	l v	Credit Card	L
•	State H	Zip Code	M -	D	Y 1 1 77	Amount	0.00
Reynoldsburg Full Name of Contributor	O H	43068		0 5	1 7		0.00
			Kegisira	ttion Num	oer, ii PA	C	
William M Quesenberry Street Address	E1/0					Form (Cash, Check, etc	- \
	Employer/Occupation/Labor Organization*						
949 Lancaster Ave City	State	Zip Code	М	D	Y	Credit Card	L
		1 1					E 00
Reynoldsburg Full Name of Contributor	OH	43068		0 6			5.00
			Registra	aton Nam	oci, ii FA	C	
Michelle Schott Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc	2)
	Employer/Occupation/Labor Organization*			Credit Card			
8168 Rameys Crossing Ct	State	Zip Code	Ιм	D	Гү	Amount	
•	OH	43005	i i	0 6			0.00
Blacklick	10 11	43003					0.00
Full Name of Contributor Registration Number, if PAC							
Diana Marlette Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc	<u>.)</u>
	Employer/Occup	ation/Labor Organization				Cash	,
3916 Cleggan St City	State	Zip Code	M	D	Y	Amount	
Canal Winchester	OH	43110		0 9			0.00
Full Name of Contributor	10 11	45110		tion Num			0.00
Dottie Low			Rogistic		001, 11 1 1 1		
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.	c.)
1963 Destin Pl N	Employer/Occupation/Labor Organization*			Cash	,		
City	State	Zip Code	М	T D	Y	Amount	
Reynoldsburg	ОН	43068	- 1		1 7		6.00
Revnoldsburg O H 43068 0 5 0 9 1 7 6.00 Full Name of Contributor Registration Number, if PAC						0.00	
Bob Hockenberger							
reet Address Employer/Occupation/Labor Organization* Form (Cash, Check, e					e.)		
8612 Appleridge Cir				Cash			
City	State	Zip Code	М	D	Y	Amount	
Pickerington	ОН	43147	0 5	i	1 7		0.00
TICKETHIZIOH	1 0	1 4014/	10.5	10.7	1 /		5.50

Page Total \$	266.00

^{*} 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)]