

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Franklin County Libertarian Party - General Fund						
Full Name of Contributor BRIAN NAILLE				Registration Number, if PAC		
Street Address 1259 BROADVIEW		Employer/Occupation/Labor Organization* 			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O H	Zip Code 43212	M 0 2	D 2 8	Y 1 4	Amount 10.00
Full Name of Contributor BRIAN NIALLE				Registration Number, if PAC		
Street Address 1259 BROADVIEW		Employer/Occupation/Labor Organization* 			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O H	Zip Code 43212	M 0 3	D 1 4	Y 1 4	Amount 10.00
Full Name of Contributor MARK NOBLE				Registration Number, if PAC		
Street Address 723 SPRINGS DRIVE		Employer/Occupation/Labor Organization* ECOT			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O H	Zip Code 43214	M 0 3	D 2 0	Y 1 4	Amount 17.76
Full Name of Contributor BRIAN NIALLE				Registration Number, if PAC		
Street Address 1259 BROADVIEW		Employer/Occupation/Labor Organization* 			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O H	Zip Code 43212	M 0 3	D 2 8	Y 1 4	Amount 10.00
Full Name of Contributor BRIAN NIALLE				Registration Number, if PAC		
Street Address 1259 BROADVIEW		Employer/Occupation/Labor Organization* 			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O H	Zip Code 43212	M 0 4	D 1 1	Y 1 4	Amount 10.00
Full Name of Contributor MARK NOBLE				Registration Number, if PAC		
Street Address 723 SPRINGS DRIVE		Employer/Occupation/Labor Organization* ECOT			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O H	Zip Code 43214	M 0 4	D 2 1	Y 1 4	Amount 17.76
Full Name of Contributor TEMSEN ONEILL				Registration Number, if PAC		
Street Address 60 ARDEN ROAD		Employer/Occupation/Labor Organization* TARGET			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O H	Zip Code 43214	M 0 5	D 1 5	Y 1 4	Amount 10.00
Full Name of Contributor DAVE HOWELL				Registration Number, if PAC		
Street Address 1305 ISLAND BAY DRIVE		Employer/Occupation/Labor Organization* NATIONWIDE/FINANCE			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State O H	Zip Code 43235	M 0 5	D 1 5	Y 1 4	Amount 120.00

* 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)]