| | _ |
|------|-----------|
| Page | <u>21</u> |

Statement of Contributions Received

Prescribed by Secretary of State 3/05

| Name of Committee in Full | | | | | | | | | |
|-------------------------------------|---|--|---------------------------|--------------------------|--|--------------|--------------------------|-----------|--|
| Friends of Redfern | | _ | | | | | | | |
| Full Name of Contributor | | | | Registra | ttion Nur | iber, if PA | VC. | | |
| Tammy Evans | | | | . | | | | | |
| Street Address | Employe | т/Оссир | ation/Labor Organization* | | | | Form (Cash, Chec | k, etc.) | |
| 6338 Beaver Lake | | | | | | | Cash | | |
| City | St | ate | Zip Code | М | D | Y | Amount | | |
| Grove City | | Н | 43123 | 1110 | 1 0 | 1 4 | | 4.00 | |
| Full Name of Contributor | | | | Registra | tion Num | ber, if PA | \Č | | |
| Steve Kile | | | | ı | | | | | |
| Street Address | Employe | т/Оссир | ation/Labor Organization* | | | | Form (Cash, Chec | k, etc.) | |
| 5821 Platinum | | | | | | | Cash | | |
| City | Sta | ate | Zip Code | Тм | D | Y | Amount | | |
| Grove City | | Н | 43123 | 110 | 1 5 | 111 | | 1.00 | |
| Full Name of Contributor | | | 10120 | | | ber, if PA | ıc | 1.00 | |
| Dawn George | | | | 1 - | | | | • | |
| Street Address | Employe | т/Оссир | ation/Labor Organization* | <u> </u> | | | Form (Cash, Check, etc.) | | |
| 5801 Platinum Drive | ' ' | , | <u>D</u> | | | | Cash | | |
| City | St | ate | Zip Code | Тм | D | Y | Amount | | |
| Grove City | 0 | Н | 43123 | 10 | 15 | 11 | | 2.00 | |
| Full Name of Contributor | | | 10120 | | | iber, if PA | C | 200 | |
| Jeff Damron | | | | | | , | | | |
| Street Address | Employe | r/Occurs | ation/Labor Organization* | <u> </u> | | | Form (Cash, Chec | k etc.) | |
| 5903 Goldstone | | ., 0 0004 | | | | | Cash | | |
| City | St | ate | Zip Code | Тм | D | Y | Amount | | |
| | | H | 43123 | 10 | 15 | 11 | , gaotai | 1.00 | |
| Grove City Full Name of Contributor | | 1.1 | 1 43123 | | | ber, if PA | C | 1.00 | |
| | | | | regisua | MOII I VIIII | ioci, ii i r | | | |
| Jodi Burroughs Street Address | Employe | r/Occurs | ation/Labor Organization* | <u> </u> | | | Form (Cash, Chec | k etc) | |
| 6042 Winnebago St. | Linploye | · | and table of an interior | | | | Cash | н, сис. у | |
| City | St | ate | Zip Code | Гм | D | ΙΥ | Amount | | |
| 1 • | | H | 43123 | | 1 3 | 1 1 1 | THE CLEAN | 2.00 | |
| Grove City Full Name of Contributor | 1.0 | 11 | 1 43123 | | | 1 | Č. | 2.00 | |
| , | | | | | | | | | |
| Diane Rizzi Street Address | Employe | riOocun | ation/Labor Organization* | | | - | Form (Cash, Chec | de eta l | |
| | Employe | Employer occupation Disease organization | | | | | Cash | | |
| 5962 Grant Run Estates Drive | Sta | nta . | Zip Code | М | D | Y | Amount | | |
| | | H | 43123 | 10 | 13 | 11 | Panouni | 1.00 | |
| Grove City Full Name of Contributor | 10 | | 1 43123 | | | ber, if PA | | 1.00 | |
| | | | | IKE gisu a | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 1001, 11 1 1 | | | |
| Nick Mowery Street Address | Employe | r/Occum | ation/Labor Organization* | Ь | _ | | Form (Carb. Char | lc ata | |
| i e | Employer/Occupation/Cabor Organization | | | | Form (Cash, Check, etc.) Cash | | | | |
| 6167 Buckey Pkway | | ate | Zip Code | М | D | Y . | Amount | | |
| l ' a | | H | I ' | 1 | | | Апоші | 1.00 | |
| Grove City Full Name of Contributor | 101 | 11 | 43123 | 10 | 13 | 11 | | 1.00 | |
| 1 | | | | Registra | ETOTI NUM | iber, if PA | iC. | | |
| Ken Leavy Street Address | Em-la: | -/Oa | ation/Lohor One | L | | . 1 | Form (Cost, Ct.) | to ata \ | |
| | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) | | | | | |
| 3611 Natalie | | | Zin Code | T 1/ | T | | Cash | | |
| City City | Sta | | Zip Code | M 10 | D 16 | 11 | Amount | 2.00 | |
| Grove City | 10 | Н | 43123 | 10 | 16 | 11 | <u></u> | 2.00 | |

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 \$ | 14.00 |
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