

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Vote Barrett						
Full Name of Contributor Transfer from Form 31-E					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State OH	Zip Code	M 0	D 3	Y 1	Amount \$195.00
Full Name of Contributor James Knap					Registration Number, if PAC	
Street Address 7150 E. Main St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 9	Y 1	Amount \$20.00
Full Name of Contributor Horst & Maria Schmitt					Registration Number, if PAC	
Street Address 7102 White Butterfly Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 9	Y 1	Amount \$75.00
Full Name of Contributor Ed Komraus					Registration Number, if PAC	
Street Address 8619 Taylor Rd. SW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 9	Y 1	Amount \$25.00
Full Name of Contributor Sally Cochran					Registration Number, if PAC	
Street Address 1275 East Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 9	Y 1	Amount \$25.00
Full Name of Contributor Michael Cochran					Registration Number, if PAC	
Street Address 7825 Quarry Cliff Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 9	Y 2	Amount \$15.00
Full Name of Contributor Dianna VanBuren					Registration Number, if PAC	
Street Address 6965 Wigwam Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 0	Amount \$25.00
Full Name of Contributor					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y	Amount

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