Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Friends of Joe Erb								
Full Name of Contributor			Registration Number, if PAC					
L. David Hamilton								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
PO Box 165	Self Employed/Financial Consultant			Check				
City	State	Zip Code	M	D	Y	Amount		
East Liverpool	OH	43920	0 4	11	$[1 \mid 1]$		75.00	
Full Name of Contributor			Registrat	tion Num	ber, if PA	С		
Larry Hamilton	_							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
49532 South Hollywood Drive	Tri-State Printing/Printer				Check			
City	State	Zip Code	М	D	Y	Amount		
East Liverpool	OH	43920	0 4	1 1	1 1		75.00	
Full Name of Contributor	Registration Number, if PAG				C			
Matthew Hammond								
Street Address		ntion/Labor Organization*				Form (Cash, Check, etc.)		
640 Lanthrop Street	Chesapeake Eneregy/Manager				Check_			
City	State	Zip Code	M	D	Y	Amount		
Columbus	OH	43206	012	213	111		325.00	
Full Name of Contributor			Registra	tion Num	ber, if PA	C		
David Hughes								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
5042 Britton Farms Drive	City of Columbus/Police Officer			Check				
City	State	Zip Code	М	D	Y	Amount		
<u>Hilliar</u> d	OH	43026	0 2	2 3	1 1		75.00	
Full Name of Contributor			Registra	tion Num	ber, if PA	C		
Barry Minor	_							
Street Address	Employer/Occupa				Form (Cash, Check, etc.)			
2190 Cricket Lane	State of 0	Ohio/ODOT Mana	Manager Check					
City	State	Zip Code	М	D	Y	Amount		
<u>Columbiana</u>	OH	44408	0 4	1 1	1 1		75.00	
Full Name of Contributor			Registra	tion Num	ber, if PA	.C	:	
Carolyn Murray								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
12 Jason Grant Drive	Lobbyist					Check		
City	State	Zip Code	M.	D	Y	Amount		
Cumberland	RI	02864			$1 \mid 1$		75.00	
Full Name of Contributor			Registra	tion Nurr	ber, if PA	ıC.		
Fredrick Pausch								
Street Address					Form (Cash, Chec	ck, etc.)		
PO BOX 211032	County Engineers Association/Lobbyist Check							
City	State	Zip Code	М	D	Y	Amount		
Upper Arlington	OH	43221	0 3	1 0			75.00	
Full Name of Contributor			Registra	tion Nun	ber, if PA	C		
Richard Stoudt								
Street Address	Employer/Occupation/Labor Organization* Form (Cash. Check, etc.)							
5821 Butler Grange Road	ODOT/Road Supervisor							
City	State	Zip Code	M	D	Y	Amount	M100 0 0	
Salem	OH	44460	0 4	1 1	11	<u> </u>	75.00	

Page Total \$	850.00
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^{*} 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)]