Page 20FZ

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full					
Triends of Debbic Drannan			Registration Number, if PAC		
Deborah E. Braman			Registration Number, 11	PAC	
Name of Committee in Full Friends of Debbic Br Full Name of Contributor Deborah E. Brannan Street Address 987 Grandiew Ave. City Columbus	Employer/Occupati	on/Labor Organization*		Form (Cash, Check, etc.)	
City	State C H	Zip Code 43 112	M D Y	Amount 198-00	
Full Name of Contributor			Registration Number, if PAC		
Street Address	Employer/Occupati	ion/Labor Organization		Form (Cash, Cheek, etc.)	
City	State	Zip Code	M D Y	Amount	
Full Name of Contributor Registration Number, if PAC					
Street Address	Employer/Occupati	ion/Labor Organization	·	Form (Cash, Check, etc.)	
City	State	Zip Code	M D Y,	Amount	
Full Name of Contributor Registration Number, if PAC					
Street Address	Employer/Occupat	ion/Labor Organization*		Form (Cash, Check, etc.)	
City	State	Zip Code	M D Y.	Amount	
Full Name of Contributor			Registration Number, it	PAC	
Street Address	Employer/Occupat	ion/Labor Organization		Form (Cash, Check, etc.)	
City	State	Zip Code	M D Y	Amount	
Full Name of Contributor			Registration Number, is	Registration Number, if PAC	
Street Address	Employer/Occupat	ion/Labor Organization		Form (Cash, Check, etc.)	
City	State	Zíp Code	M D Y	Amount	
Full Name of Contributor			Registration Number, i	Registration Number, it PAC	
Street Address	Employer/Occupat	ion/Labor Organization		Form (Cash, Check, etc.)	
City	State	Zip Code	M D Y	Amount	
Full Name of Contributor Registration Number, if PA				(PAC	
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	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)]

Page Total \$ 198.00