31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full
Friends of Cornell Robertson

Full Name of Contributor	Registration Number, if PAC						
Theodore W. Beidler							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2540 Welsford Road							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	O H	43221	0 2	1 0	1 1		100.00
Full Name of Contributor	**Registration Number, if PAC**						
Charles A. Mitchell							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2010 Inchcliff Road							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Upper Arlington	O H	43221	0 2	1 0	1 1		100.00
Full Name of Contributor	**Registration Number, if PAC**						
Robert Campbell							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2341 River Road							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Delaware	O H	43015	0 2	1 4	1 1		250.00
Full Name of Contributor	**Registration Number, if PAC**						
Gregory B. Comfort							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2275 Onandaga Drive							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	O H	43221	0 2	1 3	1 1		100.00
Full Name of Contributor	**Registration Number, if PAC**						
John Gallagher							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
7225 Lorine Court							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	O H	43235	0 2	1 1	1 1		75.00
Full Name of Contributor	**Registration Number, if PAC**						
Tobias A. Iloka							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
6677 Spring Run Drive							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Westerville	O H	43082	0 2	1 5	1 1		100.00
Full Name of Contributor	**Registration Number, if PAC**						
James Kleingers							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
4812 Scarborough Court							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Middletown	O H	45042	0 2	1 5	1 1		100.00
Full Name of Contributor	**Registration Number, if PAC**						
Larry Lyons							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
4169 Avery Road							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Hilliard	O H	43026	0 2	1 3	1 1		100.00

* 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 $ 925.00