

**Statement of Contributions Received
at a Social or Fund-Raising Event**
Prescribed by Secretary of State 3/05

Event Date	03/02/2015
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Name of Committee in Full Friends of Mary Jo Hudson					
Full Name of Contributor Charlie Breitstadt				Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M 03	D 02	Y 15 Amount \$50.00
City	State	Zip Code	Form (Cash, Check, etc.) Check		
Full Name of Contributor Gabrielle Burton				Registration Number, if PAC	
Street Address 4361 Liberty Rd	Employer/Occupation/Labor Organization*		M 03	D 02	Y 15 Amount \$25.00
City Delaware	State OH	Zip Code 43015-8616	Form (Cash, Check, etc.) Check		
Full Name of Contributor Anonymous Cash				Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M 03	D 02	Y 15 Amount \$100.00
City	State	Zip Code	Form (Cash, Check, etc.) Check		
Full Name of Contributor Cathy Collins-Taylor				Registration Number, if PAC	
Street Address 1643 Demaret Ln	Employer/Occupation/Labor Organization*		M 03	D 02	Y 15 Amount \$50.00
City Columbus	State OH	Zip Code 43228-7006	Form (Cash, Check, etc.) Check		
Full Name of Contributor Darci Congrove				Registration Number, if PAC	
Street Address 756 Jaeger St	Employer/Occupation/Labor Organization* GBQ Partners Accountant		M 03	D 02	Y 15 Amount \$150.00
City Columbus	State OH	Zip Code 43206-2271	Form (Cash, Check, etc.) Check		
Full Name of Contributor Michael Crane				Registration Number, if PAC	
Street Address 330 W Spring St Ste 200	Employer/Occupation/Labor Organization* The Crane Group President		M 03	D 02	Y 15 Amount \$1,000.00
City Columbus	State OH	Zip Code 43215-2389	Form (Cash, Check, etc.) Credit Card		
Full Name of Contributor Joseph Davy				Registration Number, if PAC	
Street Address 677 E Jeffrey Pl	Employer/Occupation/Labor Organization*		M 03	D 02	Y 15 Amount \$50.00
City Columbus	State OH	Zip Code 43214-1828	Form (Cash, Check, etc.) Check		
Full Name of Contributor Andrew Decarlo				Registration Number, if PAC	
Street Address 9500 Springfield Rd	Employer/Occupation/Labor Organization*		M 03	D 02	Y 15 Amount \$25.00
City Poland	State OH	Zip Code 44514-3102	Form (Cash, Check, etc.) Credit Card		