

Statement of Contributions Received

Prescribed by Secretary of State 03/05

| | | | | | | | |
|---|--|--------------------|---|--|----------------|--|----------------|
| Name of Committee in Full <u>Committee to Elect Lori Trent</u> | | | | | | | |
| Full Name of Contributor <u>SANDOR EB Naim</u> | | | | | | Registration Number, if PAC | |
| Street Address <u>2780 River Park Drive</u> | | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) <u>Check</u> | |
| City <u>Upper Arlington</u> | | State <u>OH</u> | Zip Code <u>43220</u> | | M <u>09</u> | D <u>16</u> | Y <u>11</u> |
| Amount <u>\$25.00</u> | | | | | | | |
| Full Name of Contributor <u>Brook A. Pickrell</u> | | | | | | Registration Number, if PAC | |
| Street Address <u>7009 Norton Crossing St.</u> | | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) <u>Check</u> | |
| City <u>New Albany</u> | | State <u>OH</u> | Zip Code <u>43054</u> | | M <u>09</u> | D <u>22</u> | Y <u>11</u> |
| Amount <u>\$100.00</u> | | | | | | | |
| Full Name of Contributor <u>Jeffrey D. Mackey</u> | | | | | | Registration Number, if PAC | |
| Street Address <u>1538 Melrose Avenue</u> | | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) <u>Check</u> | |
| City <u>Columbus</u> | | State <u>OH</u> | Zip Code <u>43224</u> | | M <u>09</u> | D <u>22</u> | Y <u>11</u> |
| Amount <u>\$50.00</u> | | | | | | | |
| Full Name of Contributor <u>S Renee DUTTON</u> | | | | | | Registration Number, if PAC | |
| Street Address <u>2375 BEAUMONT ROAD</u> | | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) <u>Check</u> | |
| City <u>Upper Arlington</u> | | State <u>OH</u> | Zip Code <u>43221</u> | | M <u>09</u> | D <u>24</u> | Y <u>11</u> |
| Amount <u>\$50.00</u> | | | | | | | |
| Full Name of Contributor <u>Lynn A. Green</u> | | | | | | Registration Number, if PAC | |
| Street Address <u>1200 Chambers Rd, #410</u> | | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) <u>Check</u> | |
| City <u>Columbus</u> | | State <u>OH</u> | Zip Code <u>43212</u> | | M <u>09</u> | D <u>24</u> | Y <u>11</u> |
| Amount <u>\$50.00</u> | | | | | | | |
| Full Name of Contributor <u>Stephanie R. Watson</u> | | | | | | Registration Number, if PAC | |
| Street Address <u>1200 Chambers Road, #460</u> | | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) <u>Check</u> | |
| City <u>Columbus</u> | | State <u>OH</u> | Zip Code <u>43212</u> | | M <u>09</u> | D <u>24</u> | Y <u>11</u> |
| Amount <u>\$50.00</u> | | | | | | | |
| Full Name of Contributor <u>Scott Goldberg</u> | | | | | | Registration Number, if PAC | |
| Street Address <u>2741 LGAR Road</u> | | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) <u>Check</u> | |
| City <u>Columbus</u> | | State <u>OH</u> | Zip Code <u>43220</u> | | M <u>10</u> | D <u>06</u> | Y <u>11</u> |
| Amount <u>\$75.00</u> | | | | | | | |
| Full Name of Contributor <u>Lynne Goldberg</u> | | | | | | Registration Number, if PAC | |
| Street Address <u>2741 LGAR Road</u> | | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) <u>Check</u> | |
| City <u>Columbus</u> | | State <u>OH</u> | Zip Code <u>43220</u> | | M <u>10</u> | D <u>06</u> | Y <u>11</u> |
| Amount <u>\$75.00</u> | | | | | | | |

* 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)]