

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus							
Full Name of Contributor David Hardesty					Registration Number, if PAC		
Street Address 4399 Olentangy Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43214	M 0	D 2	Y 1	Amount 15.00	
Full Name of Contributor Stuart Lazarus					Registration Number, if PAC		
Street Address 88 W. Beechwold Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43214	M 0	D 2	Y 1	Amount 150,000.00	
Full Name of Contributor Kathy Donlon					Registration Number, if PAC		
Street Address 9808 Winged		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line		
City Louisville	State K Y	Zip Code 40223	M 0	D 2	Y 2	Amount 100.00	
Full Name of Contributor Martha H Joyce Trust					Registration Number, if PAC		
Street Address 3275 Vinton Park Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Hilliard	State O H	Zip Code 43026	M 0	D 2	Y 2	Amount 1,000.00	
Full Name of Contributor Pamela S Bobson					Registration Number, if PAC		
Street Address 84990 Gullane Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Dublin	State O H	Zip Code 43017	M 0	D 2	Y 2	Amount 2,500.00	
Full Name of Contributor Judith D. Gussler					Registration Number, if PAC		
Street Address 5762 Blendonbrook Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Gahanna	State O H	Zip Code 43230	M 0	D 2	Y 2	Amount 1,000.00	
Full Name of Contributor Karen Schwarzwald					Registration Number, if PAC		
Street Address 821 Fox Run Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Findley	State O H	Zip Code 45840	M 0	D 2	Y 2	Amount 250.00	
Full Name of Contributor Rebecca Andre					Registration Number, if PAC		
Street Address 180 W Westheimer Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43214	M 0	D 2	Y 2	Amount 50.00	

* 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 \$ **154,915.00**