

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Metro Parks							
Full Name of Contributor Fred W. Hower and Jo'Del M. Hower					Registration Number, if PAC		
Street Address 7060 Rieber Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 0 2	D 1 8	Y 0 9	Amount \$20.00	
Full Name of Contributor Mark Real and Susan Kaminski Real					Registration Number, if PAC		
Street Address 194 West Royal Forest Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214-2029	M 0 2	D 2 1	Y 0 9	Amount \$100.00	
Full Name of Contributor Chester G. Hawley					Registration Number, if PAC		
Street Address 2690 Edington Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 2	D 2 2	Y 0 9	Amount \$1,000.00	
Full Name of Contributor Liz and Stephen Cartwright					Registration Number, if PAC		
Street Address 17 South High Street, Suite 300		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 2	D 2 2	Y 0 9	Amount \$200.00	
Full Name of Contributor Sally Hoffman					Registration Number, if PAC		
Street Address 2600 Crooked Mile Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 2	D 2 2	Y 0 9	Amount \$150.00	
Full Name of Contributor Herbert W. Gross and Judith Gross					Registration Number, if PAC		
Street Address 287 Frontenac Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 0 2	D 2 2	Y 0 9	Amount \$50.00	
Full Name of Contributor Frederick W. Ziegler					Registration Number, if PAC		
Street Address 4 Stonegate Village Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212-3270	M 0 2	D 2 3	Y 0 9	Amount \$50.00	
Full Name of Contributor Nye R. Larrimer					Registration Number, if PAC		
Street Address 5441 Nelsonia Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43213	M 0 2	D 2 3	Y 0 9	Amount \$500.00	

* 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 \$ 2,070.00