

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends of Kristin Brvant</b>							
Full Name of Contributor <b>Lisa Jones</b>					Registration Number, if PAC		
Street Address <b>6644 Rosetree Drive</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Reynoldsburg</b>	State <b>O   H</b>	Zip Code <b>43068</b>	M <b>0   7</b>	D <b>0   9</b>	Y <b>1   5</b>	Amount <b>20.00</b>	
Full Name of Contributor <b>Contributions from Form 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b> </b>	Zip Code	M <b>0   7</b>	D <b>0   1</b>	Y <b>1   5</b>	Amount <b>90.00</b>	
Full Name of Contributor <b>Christopher Marlowe Shook</b>					Registration Number, if PAC		
Street Address <b>572 Hunnicut Drive</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Reynoldsburg</b>	State <b>O   H</b>	Zip Code <b>43068</b>	M <b>0   7</b>	D <b>0   9</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Malavsia T Pollard</b>					Registration Number, if PAC		
Street Address <b>7731 Worley Drive</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Blacklick</b>	State <b>O   H</b>	Zip Code <b>43004</b>	M <b>0   7</b>	D <b>0   9</b>	Y <b>1   5</b>	Amount <b>20.00</b>	
Full Name of Contributor <b>Contributions from Form 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b> </b>	Zip Code	M <b>0   7</b>	D <b>1   7</b>	Y <b>1   5</b>	Amount <b>480.00</b>	
Full Name of Contributor <b>Jeffrey D Mackey</b>					Registration Number, if PAC		
Street Address <b>1538 Melrose Ave</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43224</b>	M <b>0   8</b>	D <b>1   2</b>	Y <b>1   5</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Joseph A Zalatoris</b>					Registration Number, if PAC		
Street Address <b>1454 Lemontree Drive</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Cincinnati</b>	State <b>O   H</b>	Zip Code <b>45240</b>	M <b>0   8</b>	D <b>1   2</b>	Y <b>1   5</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>Anonymous Cash Contributions</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Cash</b>		
City <b> </b>	State <b> </b>	Zip Code	M <b>0   8</b>	D <b>2   5</b>	Y <b>1   5</b>	Amount <b>60.00</b>	

\* 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 \$ 845.00