

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Elect Bob Kaynes							
Full Name of Contributor Mr & Mrs George Lynch					Registration Number, if PAC		
Street Address 506 N Drexel Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 7	Y 2	Y 3	Amount \$100.00
Full Name of Contributor Dr Roger Friedman					Registration Number, if PAC		
Street Address 290 N Remington		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 7	Y 2	Y 3	Amount \$50.00
Full Name of Contributor Fergus Thiebert					Registration Number, if PAC		
Street Address 62 S Ardmore Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 7	Y 2	Y 5	Amount \$50.00
Full Name of Contributor Douglas Addison					Registration Number, if PAC		
Street Address 336 S Drexel Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 7	Y 2	Y 5	Amount \$250.00
Full Name of Contributor Dr & Mrs Leonard Janis					Registration Number, if PAC		
Street Address 2772 Plymouth Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 7	Y 2	Y 5	Amount \$25.00
Full Name of Contributor Donald Garlikov					Registration Number, if PAC		
Street Address 251 S Dawson Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 7	Y 2	Y 5	Amount \$100.00
Full Name of Contributor Jeff Edelstein					Registration Number, if PAC		
Street Address 2434 Fair Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 7	Y 2	Y 5	Amount \$100.00
Full Name of Contributor Dr & Mrs Marc Hollander					Registration Number, if PAC		
Street Address 2447 Seneca Park Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck		
City Bexley	State OH	Zip Code 43209	M 0	D 7	Y 2	Y 6	Amount \$25.00

\* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$700.00