

## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Columbus Realtors PAC					Registration Number, if PAC	
Street Address 2700 Airport Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43219-2268	M 12	D 13	Y 2013	Amount \$1,000.00
Full Name of Contributor Columbus Sheet Metal Workers Committee on Political Education PAC					Registration Number, if PAC OH1053	
Street Address 3035 Lamb Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43219-2367	M 09	D 25	Y 2013	Amount \$500.00
Full Name of Contributor Corey Crognale					Registration Number, if PAC	
Street Address 1052 Arcaro Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43230-3855	M 07	D 03	Y 2013	Amount \$250.00
Full Name of Contributor Corey Crognale					Registration Number, if PAC	
Street Address 1052 Arcaro Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43230-3855	M 12	D 16	Y 2013	Amount \$250.00
Full Name of Contributor Peggy Concilla					Registration Number, if PAC	
Street Address 4041 Fairfax Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43220-4522	M 09	D 17	Y 2013	Amount \$250.00

\* 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)]