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Statement of Contributions Received

Prescribed by Secretary of State 3/05

			<u></u>						
Name of Committee in Full									
Friends of Redfern									
Full Name of Contributor		Registration			ttion Num	Number, if PAC			
Shanda Bell									
Street Address	Employer/Oc	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
4267 Eleanor							Cash		
City	State		Zip Code	М	D	Y	Amount		
Grove Citv	O I	<u> </u>	<u>43123</u>	019	1 8	111		1.00	
Full Name of Contributor	,			Registra	tion Nun	ber, if P/	VC		
Robert Peoples				ł					
Street Address	Employer/Oc	ccupat	tion/Labor Organization*				Form (Cash, Ch	eck, etc.)	
3222 Angela Drive	ŀ						Cash		
City	State		Zip Code	М	D	Y	Amount		
Grove Citv	OLE	1	43123	1019	1 8	1 1		1.00	
Full Name of Contributor	1					ber, if PA	NC.		
Jack Edwards									
Street Address	Employer/Oc	ccupat	tion/Labor Organization*		******		Form (Cash, Check, etc.)		
3188 Angela Drive							Cash		
City	State		Zip Code	М	D	Y	Amount		
Grove City	-101	<u> </u>	43123	019	1 8	[1]1]		2.00	
Full Name of Contributor			10110			ber, if PA	Č		
Patricia Haldeman									
Street Address	Employer/Oc	cupat	tion/Labor Organization*	-		_	Form (Cash, Ch	eck, etc.)	
3267 Kingswood	1	_	•				Cash		
City	State		Zip Code	Тм	D	Y	Amount		
Grove City	lou	<u>.</u>	43123	Inta	1 8	111		1.00	
Full Name of Contributor	1 0	_	40120		•	ber, if PA	\C	1.00	
Delores Heron				ľ					
Street Address	Employer/Oc	cupat	tion/Labor Organization*				Form (Cash, Ch	eck, etc.)	
3171 Kingswood	1 ' '	•	Ü				Cash	,	
City	State	1:	Zip Code	М	D	ΕŸ	Amount		
Grove City		-t	43123	019	118	1 1 1		1.00	
Full Name of Contributor	10 ; -	·L	10/120			ber, if PA	C	1.00	
Full Name of Contributor Registration Number, if PAC Richard C. Borror									
Street Address	Employer/Oc	cupat	tion/Labor Organization*				Form (Cash, Ch	eck_etc.)	
3036 Leeds Rd.		•	, , ,				Check	- ,	
City	State	1	Zip Code	М	D	Y	Amount		
Columbus	LOTE	4	43221+2623	019	210	1111		150.00	
Full Name of Contributor			10221 - 2020			ber, if PA	C	100.00	
leffrev Collins									
Street Address	Employer/Oc	cupat	tion/Labor Organization*				Form (Cash, Ch	eck, etc.)	
397 West River Drive						Cash			
City	State	1:	Zip Code	М	D	Ÿ	Amount		
Grove City	h	1	43123	1	2 0	1 1		1.00	
Full Name of Contributor	1011	- 1	10120			ber, if PA		1.00	
Dave Whitte									
Street Address	Employer/Oc	cunat	ion/Labor Organization*	-			Form (Cash, Che	eck_etc.)	
6326 Leslie Ann Court	, ,				Cash				
City	State	1:	Zip Code	М	D	Y	Amount		
Grove City	OIF	- 1	43123	0 9	2 0	1 1		2.00	
GIOVE CITY		<u> </u>	<u> </u>	1017	<u> </u>	i I I I		۷.00	

* 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 \$	159.00