

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Joe Erb							
Full Name of Contributor Marc Armstrong					Registration Number, if PAC		
Street Address 5390 Aubrey Loop		Employer/Occupation/Labor Organization* Lobbyist/Ohio Rural Electric Cooperatives			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43016	M 0	D 2	Y 2	Amount 25.00	
Full Name of Contributor Katelyn Barlage					Registration Number, if PAC		
Street Address 7167 Laver Lane		Employer/Occupation/Labor Organization* Self Employed/Fundraiser			Form (Cash, Check, etc.) Check		
City Westerville	State OH	Zip Code 43082	M 0	D 2	Y 2	Amount 25.00	
Full Name of Contributor Evan Heukisveld					Registration Number, if PAC		
Street Address 7167 Laver Lane		Employer/Occupation/Labor Organization* Ohio Sportsman Alliance/Lobbyist			Form (Cash, Check, etc.) Check		
City Westerville	State OH	Zip Code 43082	M 0	D 2	Y 2	Amount 25.00	
Full Name of Contributor Brian Stewart					Registration Number, if PAC		
Street Address 597 Clark Ave		Employer/Occupation/Labor Organization* Attorney			Form (Cash, Check, etc.) Check		
City Ashville	State OH	Zip Code 43102	M 0	D 2	Y 2	Amount 35.00	
Full Name of Contributor Maria Alexander					Registration Number, if PAC		
Street Address 911 College Avenue		Employer/Occupation/Labor Organization* Real Estate Agent/ REMAX			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43209	M 0	D 2	Y 2	Amount 50.00	
Full Name of Contributor Kristen Brinkman					Registration Number, if PAC		
Street Address 7782 Wicklow CT		Employer/Occupation/Labor Organization* K. Brinkman Associates/Lobbyist			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 0	D 2	Y 2	Amount 50.00	
Full Name of Contributor Brian Daniels					Registration Number, if PAC		
Street Address 772 Arbors Circle		Employer/Occupation/Labor Organization* Strategic Public Partners Group/Consultant			Form (Cash, Check, etc.) Check		
City Gahanna	State OH	Zip Code 43230	M 0	D 4	Y 1	Amount 50.00	
Full Name of Contributor Joseph Cannon					Registration Number, if PAC		
Street Address 2656 Chester Road		Employer/Occupation/Labor Organization* Ohio Automobile Dealers Association/Lob			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	M 0	D 4	Y 1	Amount 50.00	

* 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)]