

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Kambon, Edu</b>				
Full Name of Contributor <b>Frederick LaMarr</b>		Registration Number, if PAC		
Street Address <b>996 Oakwood Ave</b>		Employer/Occupation/Labor Organization		
City <b>Columbus</b>		State <b>Oh</b>	Zip Code <b>43206</b>	Form (Cash, Check, etc.) <b>426</b>
M    D    Y <b>10/14/13</b>		Amount <b>\$0</b>		
Full Name of Contributor <b>Dr Clayton &amp; Patricia Hicks</b>		Registration Number, if PAC		
Street Address <b>6283 Alissa Lane</b>		Employer/Occupation/Labor Organization		
City <b>Columbus</b>		State <b>Oh</b>	Zip Code <b>43213</b>	Form (Cash, Check, etc.) <b>1202</b>
M    D    Y <b>10/18/13</b>		Amount <b>\$00-</b>		
Full Name of Contributor <b>Jeffrey Dennis</b>		Registration Number, if PAC		
Street Address <b>508 Misty Lane</b>		Employer/Occupation/Labor Organization		
City <b>Cooley</b>		State <b>Oh</b>	Zip Code <b>44321</b>	Form (Cash, Check, etc.) <b>10003</b>
M    D    Y <b>10/15/13</b>		Amount <b>\$00-</b>		
Full Name of Contributor <b>Barbara Walker</b>		Registration Number, if PAC		
Street Address <b>706 Conestoga Dr.</b>		Employer/Occupation/Labor Organization		
City <b>Columbus</b>		State <b>Oh</b>	Zip Code <b>43213</b>	Form (Cash, Check, etc.) <b>1319</b>
M    D    Y <b>10/10/13</b>		Amount <b>\$25-</b>		
Full Name of Contributor <b>Robb Weind</b>		Registration Number, if PAC		
Street Address <b>242 Johnson St</b>		Employer/Occupation/Labor Organization		
City <b>Columbus</b>		State <b>Oh</b>	Zip Code <b>43203</b>	Form (Cash, Check, etc.) <b>21414198060</b>
M    D    Y <b>10/15/13</b>		Amount <b>\$30 -</b>		
Full Name of Contributor <b>Robert or Rhonda Evans</b>		Registration Number, if PAC		
Street Address <b>3841 McDannald Dr</b>		Employer/Occupation/Labor Organization		
City <b>Columbus</b>		State <b>Oh</b>	Zip Code <b>43230</b>	Form (Cash, Check, etc.) <b>6301</b>
M    D    Y <b>10/18/13</b>		Amount <b>\$30-</b>		
Full Name of Contributor <b>AKO Kambon</b>		Registration Number, if PAC		
Street Address <b>63 N. Ohio Ave</b>		Employer/Occupation/Labor Organization		
City <b>Columbus</b>		State <b>Oh</b>	Zip Code <b>43203</b>	Form (Cash, Check, etc.) <b>2051</b>
M    D    Y <b>10/20/13</b>		Amount <b>\$2,500</b>		
Full Name of Contributor <b>Dianne Reid</b>		Registration Number, if PAC		
Street Address <b>8558 Apple Ridge Cir.</b>		Employer/Occupation/Labor Organization		
City <b>Pickerington</b>		State <b>Oh</b>	Zip Code <b>43147</b>	Form (Cash, Check, etc.) <b>502</b>
M    D    Y <b>10/28</b>		Amount <b>\$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 also appear. [R.C. 3517.10(B)(4)]