

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Kambon, Edy</i>					
Full Name of Contributor <i>Cathy Morris</i>		Registration Number, if PAC			
Street Address <i>637 E. 41st St.</i>	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <i>1211</i>	
City <i>Chicago</i>	State <i>IL</i>	Zip Code <i>60653</i>	M <i>0</i>	D <i>9</i>	Y <i>13</i>
		Amount <i>100 -</i>			
Full Name of Contributor <i>Martha Dillard</i>		Registration Number, if PAC			
Street Address <i>P.O. Box 15403</i>	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <i>9112307212</i>	
City <i>Columbus</i>	State <i>Oh</i>	Zip Code <i>43215</i>	M <i>0</i>	D <i>9</i>	Y <i>12</i>
		Amount <i>100 -</i>			
Full Name of Contributor <i>Chapels of Peace Gary Funeral Home</i>		Registration Number, if PAC			
Street Address <i>2500 Cleveland Ave</i>	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <i>6641</i>	
City <i>Columbus</i>	State <i>Oh</i>	Zip Code <i>43211</i>	M <i>0</i>	D <i>9</i>	Y <i>12</i>
		Amount <i>100 -</i>			
Full Name of Contributor <i>Kathy D. Espy</i>		Registration Number, if PAC			
Street Address <i>1350 Brookwood Place</i>	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <i>1845</i>	
City <i>Columbus</i>	State <i>Oh</i>	Zip Code <i>43209</i>	M <i>0</i>	D <i>9</i>	Y <i>18</i>
		Amount <i>150 -</i>			
Full Name of Contributor <i>HC Bland and TM Bland</i>		Registration Number, if PAC			
Street Address <i>290 Eastmoor Blvd.</i>	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <i>7463</i>	
City <i>Columbus</i>	State <i>Oh</i>	Zip Code <i>43209</i>	M <i>0</i>	D <i>9</i>	Y <i>18</i>
		Amount <i>50 -</i>			
Full Name of Contributor <i>Dorothy Alexander</i>		Registration Number, if PAC			
Street Address <i>2187 Liston Ave</i>	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <i>4638</i>	
City <i>Columbus</i>	State <i>Oh</i>	Zip Code <i>43207</i>	M <i>0</i>	D <i>9</i>	Y <i>13</i>
		Amount <i>25 -</i>			
Full Name of Contributor <i>Robert Burley</i>		Registration Number, if PAC			
Street Address <i>133 Thornberry Dr</i>	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <i>571</i>	
City <i>Pittsburgh</i>	State <i>PA</i>	Zip Code <i>15235</i>	M <i>0</i>	D <i>9</i>	Y <i>13</i>
		Amount <i>100 -</i>			
Full Name of Contributor <i>Anita Burley</i>		Registration Number, if PAC			
Street Address <i>133 Thornberry Dr</i>	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <i>9507</i>	
City <i>Pittsburgh</i>	State <i>PA</i>	Zip Code <i>15235</i>	M <i>0</i>	D <i>9</i>	Y <i>13</i>
		Amount <i>100 -</i>			

* 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 \$ *725*