

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Friends of Michele Elliott</b>										
Full Name of Contributor <b>Mary Fran Sciulli</b>						Registration Number, if PAC				
Street Address <b>1349 Hickory Ridge Ln</b>			Employer/Occupation/Labor Organization* <b>Office assistant</b>				Form (Cash, Check, etc.) <b>Check</b>			
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43235</b>		M <b>01</b>		D <b>12</b>		Y <b>15</b>	
Full Name of Contributor						Registration Number, if PAC				
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
City		State	Zip Code		M		D		Y	
Full Name of Contributor						Registration Number, if PAC				
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
City		State	Zip Code		M		D		Y	
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City		State	Zip Code		M		D		Y	
Full Name of Contributor						Registration Number, if PAC				
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
City		State	Zip Code		M		D		Y	

\* 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)]