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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							-
Friends of Redfern				_			
Full Name of Contributor				Registra	tion Nun	ber, if Pa	AC
Nichole Mowery							
Street Address	Employer	r/Occupa	ation/Labor Organization*	_			Form (Cash, Check, etc.)
6167 Buckey Pkway							
City	Sta	ite	Zip Code	M	D	Y	Amount
Grove City		Н	43123	1 0	1 3	1 1	1.00
Full Name of Contributor				Registra	tion Nun	ber, if Pa	AC
Randy Coffey				<u> </u>			
Street Address	Employer	r/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
5833 Birch Bark Court							
City .	Sta	ite	Zip Code	_ M	D	Y	Amount
Grove Citv	lol	Н	43123	0 8	217	111	1.00
Full Name of Contributor			10120		tion Nun		•
Street Address	Employer	r/Occupa	ation/Labor Organization*	<u></u>			Form (Cash, Check, etc.)
			-				
City	Sta	ıte	Zip Code	М	D	Y	Amount
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Full Name of Contributor	<u> </u>		<u> </u>	Registra	tion Nur	ber, if P	AC .
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Street Address	Employer	r/Occupa	ation/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)
Silver Address	Danie,		ation Educa Conguirmanica.				t otti (Casii, Chook, etc.)
City .	Sta	ıta	Zip Code	М	D	Y	Amount
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Full Name of Contributor		·····		Denistra	tion Num	Loc if D	<u></u>
Pull Name of Controllor				VERISITE	WON 1744	10e1, 11 1 2	,
Street Address	Temployer	-/Cocurs	ation/Labor Organization*				From (Cook Check etc.)
Sucet Address	Employes	// ///сс ира	HOW LADOI OF BAIRZON				Form (Cash, Check, etc.)
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City	Sta	ne	Zip Code	M	D	Y	Amount
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Full Name of Contributor				Registra	tion Nur	iber, if PA	AC
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Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
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City	Star	ite	Zip Code	M,	D	Y	Amount
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Full Name of Contributor				Registra	tion Num	ber, if P/	NC
Street Address	Employer	/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
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City	Stat	te	Zip Code	М	D	Y	Amount
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Full Name of Contributor				Registra	tion Num	ber, if PA	AC
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Street Address	Employer/Occupation/Labor Organization®			Form (Cash, Check, etc.)			
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City	Stat	te	Zip Code	М	D	Y	Amount

* 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	\$ 2.00