

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Committee to Re-elect Fishel</b>							
Full Name of Contributor <b>Amy Hollingsworth</b>					Registration Number, if PAC		
Street Address <b>2607 E. Broad St.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>1</b>	D <b>0</b>	Y <b>8</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>David Irwin</b>					Registration Number, if PAC		
Street Address <b>333 S. Roosevelt Ave.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>1</b>	D <b>0</b>	Y <b>5</b>	Amount <b>30.00</b>	
Full Name of Contributor <b>Matt Lampke</b>					Registration Number, if PAC		
Street Address <b>2447 Plymouth Ave.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>Deborah Leasure</b>					Registration Number, if PAC		
Street Address <b>870 Montrose Ave.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>Amy Thompson</b>					Registration Number, if PAC		
Street Address <b>343 S. Roosevelt</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>20.00</b>	
Full Name of Contributor <b>Susan Zanner</b>					Registration Number, if PAC		
Street Address <b>316 S. Roosevelt Ave.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>1</b>	D <b>0</b>	Y <b>9</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Vicki Hilbrands</b>					Registration Number, if PAC		
Street Address <b>2619 E. Broad St.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>9</b>	Y <b>3</b>	Amount <b>25.00</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	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)]