

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee							
Full Name of Contributor Brian P Kinzelman						Registration Number, if PAC	
Street Address 4200 Randmore Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington		State OH	Zip Code 43220-4440	M 10	D 22	Y 2012	Amount \$200.00
Full Name of Contributor Nathan Johnson						Registration Number, if PAC	
Street Address 2754 Linshaw Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Cincinnati		State OH	Zip Code 45208-2224	M 11	D 02	Y 2012	Amount \$50.00
Full Name of Contributor Nicholas G G Kontras						Registration Number, if PAC	
Street Address 4585 Benderton Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus		State OH	Zip Code 43220-3019	M 10	D 24	Y 2012	Amount \$500.00
Full Name of Contributor Stella B. Kontras						Registration Number, if PAC	
Street Address 4725 Dierker Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43220-2942	M 10	D 22	Y 2012	Amount \$1,000.00
Full Name of Contributor Timothy J Katz						Registration Number, if PAC	
Street Address 781 S Roosevelt Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Bexley		State OH	Zip Code 43209-2590	M 10	D 24	Y 2012	Amount \$25.00

* 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)}