

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus									
Full Name of Contributor Steven M. Shellabarger						Registration Number, if PAC			
Street Address 948 Neil Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O	H H	Zip Code 43201	M 0	D 9	Y 1	Amount 500.00		
Full Name of Contributor Michael Council						Registration Number, if PAC			
Street Address 108 Buttles Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43215	M 0	D 9	Y 2	Amount 500.00		
Full Name of Contributor Barbara K. Fergus						Registration Number, if PAC			
Street Address 5586 Dundon Court			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Dublin	State O	H H	Zip Code 43017	M 1	D 0	Y 0	Amount 5,000.00		
Full Name of Contributor J. Richard Greer						Registration Number, if PAC			
Street Address 1200 Chambers Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43212	M 1	D 0	Y 0	Amount 1,000.00		
Full Name of Contributor Dale Abrams						Registration Number, if PAC			
Street Address 950 Bryden Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43205	M 1	D 0	Y 2	Amount 50.00		
Full Name of Contributor Elliot Fishman						Registration Number, if PAC			
Street Address 960 Bryden Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43205	M 1	D 0	Y 2	Amount 50.00		
Full Name of Contributor Robert H. Jeffrey						Registration Number, if PAC			
Street Address 296 Ashbourne Place			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43209	M 1	D 0	Y 2	Amount 1,000.00		
Full Name of Contributor Robert Lazarus, Jr.						Registration Number, if PAC 500			
Street Address 2094 Parkhill Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43209	M 1	D 0	Y 2	Amount 500.00		

* 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)]

Page Total \$ **8,600.00**