Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						,
Friends of Mary Jo Hudson		_				
Full Name of Contributor Jules Garel			I		on Numb	per, if PAC
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc. Bailey Cavaliefi Card					
12 Lyonsgate	Attorney				Credit Card	
City Columbus	State OH	Zip Code 43209-1481	M 10	D 25	Y 15	Amount \$250.00
Full Name of Contributor Russell Goodwin	Registration Number, if PAC					
Street Address 103 E 1st Ave	Employer/Occupation/Labor Organization* Henry Schein Animal Health Sales				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43201-2469	M 10	D 15	Y 15	Amount \$150.00
Full Name of Contributor Jolene Griffith	Registration Number				per, if PAC	
Street Address 5264 Longrifle Rd	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card	
City Westerville	State OH	Zip Code 43081-4462	M 10	D 30	Ϋ́ 15	Amount \$50.00
Full Name of Contributor Richard Harrison	Registration Number, if PAC					
Street Address 35 E Russell St	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card	
City Columbus	State QH	Zip Code 43215-2036	M 10	D 15	¥ 15	Amount \$25.00
Full Name of Contributor Bill Hedrick	Registration Number, if PAC					
Street Address 535 W 1st Ave	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215-1101	M 10	D 15	Y 15	Amount \$100.00
ull Name of Contributor ristin Long						
Street Address 443 Garden Rd	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43214-2234	M 10	D 15	Y 15	Amount \$100.00
Full Name of Contributor Harlan Louis	Registration Number				er, if PAC	
Street Address 6140 Hilltop Trail Dr	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card	
City New Albany	State OH	Zip Code 43054-9070	M 10	D 28	Y 15	Amount \$100.00
Full Name of Contributor Nancy Manougan	Registration Num				on Numb	er, if PAC
Street Address 5857 Leven Links Ct	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) Check
City Oublin	State OH	Zip Code 43017-8542	M 11	D 07	Y 15	Amount \$25.00

Page Total	\$800.00
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^{*} 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(8)(4)]