

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 James Hagedorn						Registration Number, if PAC	
Street Address 3085 SE Saint Lucie Blvd			Employer/Occupation/Labor Organization* Scott's Miracle Gro CEO			Form (Cash, Check, etc.) Check	
City Stuart		State FL	Zip Code 34997-5423	M 06	D 01	Y 15	Amount \$1,000.00
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 05	D 02	Y 15	Amount \$50.00
Full Name of Contributor IBEW PAC Voluntary Fund						Registration Number, if PAC	
Street Address 900 7th St NW			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Washington		State DC	Zip Code 20001-3886	M 05	D 01	Y 15	Amount \$500.00
Full Name of Contributor Jill Murphey						Registration Number, if PAC	
Street Address 1598 Tuscarora Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City		State OH	Zip Code 43123-9557	M 05	D 01	Y 15	Amount \$50.00
Full Name of Contributor Nationwide Mutual Insurance PAC						Registration Number, if PAC c0076179	
Street Address 1 Nationwide Plz			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215-2226	M 05	D 01	Y 15	Amount \$500.00
Full Name of Contributor Kelly Smith						Registration Number, if PAC	
Street Address 241 Piedmont Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus		State OH	Zip Code 43214-3813	M 04	D 20	Y 15	Amount \$100.00
Full Name of Contributor Stonewall Democrats of Central Ohio						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215	M 05	D 01	Y 15	Amount \$500.00
Full Name of Contributor Leslie Wexner						Registration Number, if PAC	
Street Address 8000 Walton Pkwy Ste 100			Employer/Occupation/Labor Organization* L Brands CEO			Form (Cash, Check, etc.) Check	
City New Albany		State OH	Zip Code 43054-7075	M 05	D 18	Y 15	Amount \$1,000.00

* 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 \$3,700.00