

FILED

Ohio Campaign Finance Report

08 APR 11 PM 3:20

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY
REGISTRATION NUMBER, IF PAC

Full Name of Committee Committee for Cindy Lazarus						Registration Number, if PAC				
Full Name of Candidate Cynthia C. Lazarus										
Street Address 404 S. Chesterfield Road					Office Sought Franklin County Commi		District			
City Columbus					State O H		Zip Code 43209			
Type of Report (place X to the left of report type)	Pre-Primary		X Post-Primary		Pre-General		Post-General		Annual Year	
	July		August		September		Termination		Semiannual	
	Monthly		Monthly		Monthly		Termination			
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Date of Election		M 0 3	D 0 4	Y 2008

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$	17,037.97
2. Total monetary contributions (From Form No. 31-A)	\$	172,565.00
3. Total other income (From Form No. 31-A-2)	\$	812.50
4. Total funds available (sum of lines 1, 2, 3)	\$	190,415.47
5. Total monetary expenditure (From Form No. 31-B)	\$	181,308.51
6. Balance on hand (line 4 minus line 5)	\$	9,106.96
7. Value of in-kind contributions received (From Form No. 31-I-1)	\$	650.00
8. Value of in-kind contributions made (From Form No. 31-I-2)	\$	
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	
12. Value of independent expenditures made (From Form No. 31-U)	\$	
13. For Electronic Filing Entities only Sum of lines 2, 7 and amount of any new loans received this period	\$	

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

Patricia M. Logsdon, deputy treas.

Patricia M. Logsdon
Signature

4/11/08
Date

Print Name and Title (Treasurer and Deputy Treasurer only)

Contribution pages 9

Expenditure pages 6

Other pages 2

Total pages 17

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus						
Full Name of Contributor Benjamin L. Zox				Registration Number, if PAC		
Street Address 250 West Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43215	M 0	D 2	Y 1 4 0 8	Amount 200.00
Full Name of Contributor Laurence G. Ruben				Registration Number, if PAC		
Street Address 140 S. Columbia		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43209	M 0	D 2	Y 1 4 0 8	Amount 1,000.00
Full Name of Contributor Katherine S. LeVeque				Registration Number, if PAC		
Street Address 50 W. Broad St., Ste 4000		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43215	M 0	D 2	Y 1 4 0 8	Amount 500.00
Full Name of Contributor Christian K. Zacher				Registration Number, if PAC		
Street Address 2021 Indianola Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43201	M 0	D 2	Y 1 4 0 8	Amount 50.00
Full Name of Contributor Citizens for Habash				Registration Number, if PAC		
Street Address 404 S. Chesterfield Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43209	M 0	D 2	Y 1 4 0 8	Amount 2,500.00
Full Name of Contributor Thomas J. Grote				Registration Number, if PAC		
Street Address 982 Jaeger Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43206	M 0	D 2	Y 1 4 0 8	Amount 500.00
Full Name of Contributor Malcolm Baroway				Registration Number, if PAC		
Street Address 421 Brookside Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43209	M 0	D 2	Y 1 8 0 8	Amount 100.00
Full Name of Contributor Laura Wojciechowski				Registration Number, if PAC		
Street Address 1654 Dollivor Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43235	M 0	D 2	Y 1 1 0 8	Amount 100.00

* 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)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus						
Full Name of Contributor David Hardesty				Registration Number, if PAC		
Street Address 4399 Olentangy Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43214	M 0 2	D 1 4	Y 0 8	Amount 15.00
Full Name of Contributor Stuart Lazarus				Registration Number, if PAC		
Street Address 88 W. Beechwold Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43214	M 0 2	D 1 4	Y 0 8	Amount 150,000.00
Full Name of Contributor Kathy Donlon				Registration Number, if PAC		
Street Address 9808 Winged		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Louisville	State K Y	Zip Code 40223	M 0 2	D 2 5	Y 0 8	Amount 100.00
Full Name of Contributor Martha H Joyce Trust				Registration Number, if PAC		
Street Address 3275 Vinton Park Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Hilliard	State O H	Zip Code 43026	M 0 2	D 2 2	Y 0 8	Amount 1,000.00
Full Name of Contributor Pamela S Bobson				Registration Number, if PAC		
Street Address 84990 Gullane Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Dublin	State O H	Zip Code 43017	M 0 2	D 2 2	Y 0 8	Amount 2,500.00
Full Name of Contributor Judith D. Gussler				Registration Number, if PAC		
Street Address 5762 Blendonbrook Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 2	D 2 2	Y 0 8	Amount 1,000.00
Full Name of Contributor Karen Schwarzwald				Registration Number, if PAC		
Street Address 821 Fox Run Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Findley	State O H	Zip Code 45840	M 0 2	D 2 2	Y 0 8	Amount 250.00
Full Name of Contributor Rebecca Andre				Registration Number, if PAC		
Street Address 180 W Westheimer Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43214	M 0 2	D 2 2	Y 0 8	Amount 50.00

* 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)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus							
Full Name of Contributor Brad A. Myers					Registration Number, if PAC		
Street Address 4528 Olentangy Blvd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43214	M 0	D 2	Y 2308	Amount 50.00
Full Name of Contributor Susan B. Greenberger					Registration Number, if PAC		
Street Address 311 S. Columbia Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43209	M 0	D 2	Y 2308	Amount 100.00
Full Name of Contributor Shael Brachman					Registration Number, if PAC		
Street Address 311 N. Drexel Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43209	M 0	D 2	Y 2308	Amount 300.00
Full Name of Contributor James E. Daley					Registration Number, if PAC		
Street Address 4300 Dublin Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43221-5000	M 0	D 2	Y 2308	Amount 50.00
Full Name of Contributor Kathryn S. Malone					Registration Number, if PAC		
Street Address 988 Circle on the Green			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43235	M 0	D 2	Y 2308	Amount 500.00
Full Name of Contributor Abigail E. Feidner					Registration Number, if PAC		
Street Address 47 W. Weber Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43202-1922	M 0	D 2	Y 2308	Amount 250.00
Full Name of Contributor Todd M. Baker					Registration Number, if PAC		
Street Address 95 E. Beaumont Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43214-2101	M 0	D 2	Y 2308	Amount 250.00
Full Name of Contributor Paul Giorgianni					Registration Number, if PAC		
Street Address 230 Clover Court			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin		State O H	Zip Code 43017	M 0	D 2	Y 2308	Amount 250.00

* 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)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus							
Full Name of Contributor Stephen Cartwright					Registration Number, if PAC		
Street Address 17 S. High Street			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 0	D 2	Y 23	Amount 100.00	
Full Name of Contributor Michelle R. Martin					Registration Number, if PAC		
Street Address 955 Blind Brook Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43235-1204	M 0	D 2	Y 23	Amount 25.00	
Full Name of Contributor Phil S. Bradford III					Registration Number, if PAC		
Street Address 4520 Benderton Court			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43220	M 0	D 2	Y 23	Amount 100.00	
Full Name of Contributor Steve Cecil					Registration Number, if PAC		
Street Address 2293 Chambell Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Lexington	State K Y	Zip Code 40513	M 0	D 2	Y 22	Amount 50.00	
Full Name of Contributor Robert F. Howarth, Jr.					Registration Number, if PAC		
Street Address 325 Parkview Avenue			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43209	M 0	D 2	Y 22	Amount 100.00	
Full Name of Contributor Richard Borrer					Registration Number, if PAC		
Street Address 3036 Leeds Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43221	M 0	D 2	Y 22	Amount 100.00	
Full Name of Contributor Laralyn Sasaki					Registration Number, if PAC		
Street Address 1224 Indianola Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43201	M 0	D 2	Y 22	Amount 25.00	
Full Name of Contributor Jordan Finegold					Registration Number, if PAC		
Street Address 238 N. Cassady Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley	State O H	Zip Code 43209	M 0	D 2	Y 22	Amount 100.00	

* 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)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus						
Full Name of Contributor Jack J. Chester				Registration Number, if PAC		
Street Address 65 E. State Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 0 2	D 2 2	Y 0 8	Amount 500.00
Full Name of Contributor John K Fitch				Registration Number, if PAC		
Street Address 41 Stanberry Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley	State O H	Zip Code 43209	M 0 3	D 0 1	Y 0 8	Amount 150.00
Full Name of Contributor John F. Ferner				Registration Number, if PAC		
Street Address 8876 Chestershire Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43204	M 0 3	D 0 1	Y 0 8	Amount 100.00
Full Name of Contributor Darrell Spurlock				Registration Number, if PAC		
Street Address 4683 Galecrest Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash	
City Columbus	State O H	Zip Code 43207	M 0 3	D 0 3	Y 0 8	Amount 50.00
Full Name of Contributor Ann Hefferman				Registration Number, if PAC		
Street Address 139 S. Garfield		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43205	M 0 3	D 0 2	Y 0 8	Amount 15.00
Full Name of Contributor Jane Hefferman				Registration Number, if PAC		
Street Address 137 S. Garfield Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43205	M 0 3	D 0 2	Y 0 8	Amount 25.00
Full Name of Contributor Allen J. Silverman				Registration Number, if PAC		
Street Address 2683 Wellesley Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43209	M 0 3	D 0 2	Y 0 8	Amount 25.00
Full Name of Contributor Larned Marlow				Registration Number, if PAC		
Street Address 144 S. Monroe		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43205	M 0 3	D 0 2	Y 0 8	Amount 10.00

* 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)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus						
Full Name of Contributor Ann E. Schiele				Registration Number, if PAC		
Street Address 533 Bramblewood Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State O H	Zip Code 43081	M 0	D 3	Y 0 2 0 8	Amount 50.00
Full Name of Contributor Neal P Cavanaugh				Registration Number, if PAC		
Street Address 4542 Arlingate Dr. E.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Upper Arlington	State O H	Zip Code 43221	M 0	D 3	Y 0 2 0 8	Amount 100.00
Full Name of Contributor Richard P. Murphy				Registration Number, if PAC		
Street Address 2591 Haverford Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Upper Arlington	State O H	Zip Code 43220	M 0	D 3	Y 0 2 0 8	Amount 500.00
Full Name of Contributor Williams Living Trust, Jean S. Williams TR				Registration Number, if PAC		
Street Address 6285 Ballmer Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Canal Winchester	State O H	Zip Code 43110	M 0	D 3	Y 0 3 0 8	Amount 500.00
Full Name of Contributor Dennis J. Zack				Registration Number, if PAC		
Street Address 2 Keswick Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City New Albany	State O H	Zip Code 43054	M 0	D 3	Y 0 3 0 8	Amount 300.00
Full Name of Contributor Babette Gorman				Registration Number, if PAC		
Street Address 353 N Drexel Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus	State O H	Zip Code 43209	M 0	D 2	Y 2 7 0 8	Amount 100.00
Full Name of Contributor Jennifer Flint				Registration Number, if PAC		
Street Address 6908 Perry Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Worthington	State O H	Zip Code 43085	M 0	D 2	Y 2 7 0 8	Amount 100.00
Full Name of Contributor Thom & Jane McCain				Registration Number, if PAC		
Street Address 146 Glenmont		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus	State O H	Zip Code 43214	M 0	D 2	Y 2 7 0 8	Amount 100.00

* 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)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus							
Full Name of Contributor Bill Habig					Registration Number, if PAC		
Street Address 3708 Racoon Valley Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Granville	State O H	Zip Code 43023	M 0 2	D 2 7	Y 0 8	Amount 250.00	
Full Name of Contributor Russell Childeers					Registration Number, if PAC		
Street Address 296 E. Beaumont Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus	State O H	Zip Code 43214	M 0 2	D 2 7	Y 0 8	Amount 50.00	
Full Name of Contributor Christina Redman					Registration Number, if PAC		
Street Address 2710 Folkstone			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Upper Arlington	State O H	Zip Code 43220	M 0 2	D 2 7	Y 0 8	Amount 150.00	
Full Name of Contributor Jeanne Ross					Registration Number, if PAC		
Street Address 2376 Brentwood Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus	State O H	Zip Code 43209	M 0 2	D 2 7	Y 0 8	Amount 250.00	
Full Name of Contributor Leslie Laufman					Registration Number, if PAC		
Street Address 4272 Dublin Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus	State O H	Zip Code 43221	M 0 2	D 2 7	Y 0 8	Amount 500.00	
Full Name of Contributor William Pflaum					Registration Number, if PAC		
Street Address 4650 Renwood Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Dayton	State O H	Zip Code 45429	M 0 2	D 2 7	Y 0 8	Amount 100.00	
Full Name of Contributor Dan Vincent					Registration Number, if PAC		
Street Address 6321 Bidwell Ln			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus	State O H	Zip Code 43213	M 0 2	D 2 7	Y 0 8	Amount 200.00	
Full Name of Contributor Robert Carter					Registration Number, if PAC		
Street Address 1620 E Broad St. #1007			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus	State O H	Zip Code 43215	M 0 2	D 2 7	Y 0 8	Amount 100.00	

* 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)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus							
Full Name of Contributor Bill and Sue Eubanks					Registration Number, if PAC		
Street Address 1875 Andover Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus		State O H	Zip Code 43212	M 0 3	D 0 3	Y 0 8	Amount 250.00
Full Name of Contributor Maureen Conley					Registration Number, if PAC		
Street Address 2646 Henthorn Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus		State O H	Zip Code 43221	M 0 3	D 0 3	Y 0 8	Amount 100.00
Full Name of Contributor Carol Andreae					Registration Number, if PAC		
Street Address 2486 Bexley Park Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Bexley		State O H	Zip Code 43209	M 0 3	D 0 3	Y 0 8	Amount 200.00
Full Name of Contributor Suzy Swanson					Registration Number, if PAC		
Street Address 1955 N. Devon Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus		State O H	Zip Code 43212	M 0 3	D 0 3	Y 0 8	Amount 50.00
Full Name of Contributor Karen Veronica					Registration Number, if PAC		
Street Address 107 Highmeadow Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 0 3	Y 0 8	Amount 100.00
Full Name of Contributor Mary Lynn Readey					Registration Number, if PAC		
Street Address 7677 Riverside Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Dublin		State O H	Zip Code 43016	M 0 3	D 0 3	Y 0 8	Amount 250.00
Full Name of Contributor Debra Moore					Registration Number, if PAC		
Street Address 13 Lyonsgate Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43209	M 0 3	D 0 4	Y 0 8	Amount 100.00
Full Name of Contributor Peter Coccia					Registration Number, if PAC		
Street Address 379 E. North Broadway			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on line	
City Columbus		State O H	Zip Code 43214	M 0 3	D 1 0	Y 0 8	Amount 75.00

* 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)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee for Cindy Lazarus							
Full Name of Contributor Stuart Lazarus					Registration Number, if PAC		
Street Address 88 Beechwold			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43214	M 0	D 3	Y 2 8 0 8	Amount 5,000.00
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
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
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
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
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
Full Name of Contributor					Registration Number, if PAC		
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City		State	Zip Code	M	D	Y	Amount
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)]

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Committee for Cindy Lazarus						
To Whom Paid Jonathan Varner & Associates			M	D	Y	Amount
			0	2	15	08 25,000.00
Address 1991 Glenn Avenue		Purpose TV Purchase				
City Columbus	State O	H	Zip Code 43212	Check Number 1016		
To Whom Paid WCMH-TV			M	D	Y	Amount
			0	2	15	08 11,560.00
Address 3165 Olentangy River Road		Purpose TV Purchase				
City Columbus	State O	H	Zip Code 43212	Check Number 1017		
To Whom Paid WBNS-TV			M	D	Y	Amount
			0	2	15	08 15,002.50
Address 770 Twin Rivers Drive		Purpose TV Purchase				
City Columbus	State O	H	Zip Code 43215	Check Number 1018		
To Whom Paid WSYX-TV			M	D	Y	Amount
			0	2	15	08 5,321.00
Address 1261 Dublin Road		Purpose TV Purchase				
City Columbus	State O	H	Zip Code 43215	Check Number 1019		
To Whom Paid WTTE-TV			M	D	Y	Amount
			0	2	15	08 1,445.00
Address 1261 Dublin Road		Purpose TV Purchase				
City Columbus	State O	H	Zip Code 43215	Check Number 1020		
To Whom Paid Gina Gabriel			M	D	Y	Amount
			0	2	15	08 2,744.70
Address 5811 Whitecraigs Ct.		Purpose TV buy				
City Dublin	State O	H	Zip Code 43017	Check Number 1021		
To Whom Paid RAM Studio			M	D	Y	Amount
			0	2	16	08 500.00
Address 170 N. Nelson Road		Purpose Photo Shoot				
City Columbus	State O	H	Zip Code 43219	Check Number 1022		
To Whom Paid Boxer Rebellion			M	D	Y	Amount
			0	2	16	08 175.00
Address 5078 Waycroft Court		Purpose Web Site work				
City Hilliard	State O	H	Zip Code 43026	Check Number 1023		

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Committee for Cindy Lazarus							
To Whom Paid				M	D	Y	Amount
Winning Connections				0	2	1608	8,395.60
Address		Purpose					
317 Pennsylvania Ave. SE		Phone banks					
City		State	Zip Code	Check Number			
Washington		D C	20003	1024			
To Whom Paid				M	D	Y	Amount
Donald Van Meter				0	2	1608	1,881.33
Address		Purpose					
21 E. State Street		yard signs					
City		State	Zip Code	Check Number			
Columbus		O H	43215	1025			
To Whom Paid				M	D	Y	Amount
Blue Eutopia				0	2	1808	13.78
Address		Purpose					
PO Box 4486		transaction charges					
City		State	Zip Code	Check Number			
Seattle		W A	98194	on line			
To Whom Paid				M	D	Y	Amount
Time Warner				0	2	2008	9,695.10
Address		Purpose					
1266 Dublin Road		TV Purchase					
City		State	Zip Code	Check Number			
Columbus		O H	43215	1026			
To Whom Paid				M	D	Y	Amount
Viamedia				0	2	2008	3,785.65
Address		Purpose					
330 W. Spring Street		TV Purchase					
City		State	Zip Code	Check Number			
Columbus		O H	43215	1027			
To Whom Paid				M	D	Y	Amount
Nancy Paul & Associates				0	2	2008	780.00
Address		Purpose					
947 E. Johnstown Road		Website updates					
City		State	Zip Code	Check Number			
Gahanna		O H	43230	1028			
To Whom Paid				M	D	Y	Amount
WCMH-TV				0	2	2108	18,168.75
Address		Purpose					
3165 Olentangy River Road		TV Purchase					
City		State	Zip Code	Check Number			
Columbus		O H	43215	1029			
To Whom Paid				M	D	Y	Amount
WBNS-TV				0	2	2108	17,467.50
Address		Purpose					
770 Twin Rivers Drive		TV Purchase					
City		State	Zip Code	Check Number			
Columbus		O H	43215	1030			

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Committee for Cindy Lazarus							
To Whom Paid WSYX-TV			M	D	Y	Amount	
			0	2	2	1	0 8 6,141.25
Address 1261 Dublin Road		Purpose TV Purchase					
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43215	Check Number 1031				
To Whom Paid WTTE-TV			M	D	Y	Amount	
			0	2	2	1	0 8 2,167.50
Address 1261 Dublin Road		Purpose TV Purchase					
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43215	Check Number 1032				
To Whom Paid Gina Gabriel			M	D	Y	Amount	
			0	2	2	1	0 8 4,729.13
Address 5811 Whitecraigs Ct		Purpose TV Buyer					
City Dublin	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43017	Check Number 1033				
To Whom Paid Stuart Lazarus			M	D	Y	Amount	
			0	2	2	6	0 8 974.40
Address 88 W. Beechwold		Purpose reimburse for yard signs, web site exp. & check collections					
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43214	Check Number 1034				
To Whom Paid Boxer Rebellion			M	D	Y	Amount	
			0	2	2	6	0 8 245.00
Address 5078 Waycroft Ct.		Purpose web site updates					
City Hilliard	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43026	Check Number 1035				
To Whom Paid Browning Design			M	D	Y	Amount	
			0	2	2	7	0 8 1,016.00
Address 335 Wilber		Purpose design work					
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43215	Check Number 1036				
To Whom Paid Jonathan Varner & Associates			M	D	Y	Amount	
			0	2	2	7	0 8 11,623.05
Address 1991 Glenn Ave.		Purpose printing & mailing					
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43212	Check Number 1037				
To Whom Paid WVKO			M	D	Y	Amount	
			0	2	2	7	0 8 735.00
Address 74 S. 4th Street		Purpose Radio time					
City Columbus	State <input type="radio"/> O <input type="radio"/> H	Zip Code 43215	Check Number 1038				

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Committee for Cindy Lazarus							
To Whom Paid			M	D	Y	Amount	
WCMH			0	2	2 9	0	8
5,142.50							
Address		Purpose					
3165 Olentangy River Rd		TV Time					
City	State	Zip Code	Check Number				
Columbus	O H	43202	1039				
To Whom Paid			M	D	Y	Amount	
WBNS-TV			0	2	2 9	0	8
850.00							
Address		Purpose					
770 Twin Rivers Dr.		TV time					
City	State	Zip Code	Check Number				
Columbus	O H	43215	1040				
To Whom Paid			M	D	Y	Amount	
WTTE-TV			0	2	2 9	0	8
1,296.25							
Address		Purpose					
1261 Dublin Road		TV time					
City	State	Zip Code	Check Number				
Columbus	O H	43215	1041				
To Whom Paid			M	D	Y	Amount	
Time Warner TV			0	2	2 9	0	8
637.50							
Address		Purpose					
580 N. 4th Street		TV time					
City	State	Zip Code	Check Number				
Columbus	O H	43215	1042				
To Whom Paid			M	D	Y	Amount	
Gina Gabriel			0	2	2 9	0	8
652.40							
Address		Purpose					
5811 Whitecraigs Ct.		Media buyer					
City	State	Zip Code	Check Number				
Dublin	O H	43017	1043				
To Whom Paid			M	D	Y	Amount	
Radio One			0	2	2 9	0	8
255.00							
Address		Purpose					
350 E. First Ave.		Radio time					
City	State	Zip Code	Check Number				
Columbus	O H	43201	1044				
To Whom Paid			M	D	Y	Amount	
Mahdi Taakiilo			0	2	2 9	0	8
250.00							
Address		Purpose					
1110 Morse Rd. #216		GOTV					
City	State	Zip Code	Check Number				
Columbus	O H	43229	1045				
To Whom Paid			M	D	Y	Amount	
Donald Van Meter			0	3	0 1	0	8
1,265.00							
Address		Purpose					
21 E. State Street		Radio time					
City	State	Zip Code	Check Number				
Columbus	O H	43215	1046				

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full													
Committee for Cindy Lazarus													
To Whom Paid						M	D	Y	Amount				
H.A.N.D.						0	3	0	3	0	8	500.00	
Address				Purpose									
1040 Morse Road				GOTV									
City		State		Zip Code		Check Number							
Columbus		OH		43229		1047							
To Whom Paid						M	D	Y	Amount				
WCMH-TV						0	3	0	3	0	8	1,742.50	
Address				Purpose									
3165 Olentangy River Road				TV time									
City		State		Zip Code		Check Number							
Columbus		OH		43215		1048							
To Whom Paid						M	D	Y	Amount				
WBNS-TV						0	3	0	3	0	8	1,870.00	
Address				Purpose									
770 Twin Rivers Dr.				TV time									
City		State		Zip Code		Check Number							
Columbus		OH		43215		1049							
To Whom Paid						M	D	Y	Amount				
Amama Inc						3	0	3	0	8	250.00		
Address				Purpose									
3434 Cleveland Ave.				GOTV									
City		State		Zip Code		Check Number							
Columbus		OH		43224		1050							
To Whom Paid						M	D	Y	Amount				
Amana Inc.						0	3	0	4	0	8	250.00	
Address				Purpose									
3434 Cleveland Ave.				GOTV									
City		State		Zip Code		Check Number							
Columbus		OH		43224		1051							
To Whom Paid						M	D	Y	Amount				
Stuart Lazarus						0	3	0	5	0	8	734.25	
Address				Purpose									
88 W Beechcroft				yard signs									
City		State		Zip Code		Check Number							
Columbus		OH		43214		1052							
To Whom Paid						M	D	Y	Amount				
Jonathan Varner & Associates						0	3	2	1	0	8	4,243.34	
Address				Purpose									
1991 Glenn Avenue				Autocalls									
City		State		Zip Code		Check Number							
Columbus		OH		43229		1053							
To Whom Paid						M	D	Y	Amount				
CAM Talent						0	3	2	2	0	8	600.00	
Address				Purpose									
1350 W. Fifth Ave., Suite 25				TV production									
City		State		Zip Code		Check Number							
Columbus		OH		43212		1054							

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Committee for Cindy Lazarus						
To Whom Paid Patricia M. Logsdon			M	D	Y	Amount 148.57
Address 404 S. Chesterfield Road			Purpose Office supplies			
City Columbus		State O H	Zip Code 43209	Check Number 1055		
To Whom Paid Lyon Video			M	D	Y	Amount 11,053.96
Address 1201 Olentangy River Road			Purpose TV production			
City Columbus		State O H	Zip Code 43212	Check Number 1056		
To Whom Paid Columbus First Bank			M	D	Y	Amount 8.28
Address 6877 N High Street			Purpose service charge			
City Worthington		State O H	Zip Code 43085	Check Number		
To Whom Paid Blue Utopia			M	D	Y	Amount 139.18
Address PO Box 4486			Purpose transaction charges			
City Seattle		State W A	Zip Code 98194	Check Number on line		
To Whom Paid Blue Utopia			M	D	Y	Amount 65.39
Address PO Box 4486			Purpose transaction charges			
City Seattle		State W A	Zip Code 98194	Check Number on line		
To Whom Paid Blue Utopia			M	D	Y	Amount 5.27
Address PO Box 4486			Purpose transaction charges			
City Seattle		State W A	Zip Code 98194	Check Number on line		
To Whom Paid Blue Utopia			M	D	Y	Amount 146.12
Address PO Box 4486			Purpose transaction charges			
City Seattle		State W A	Zip Code 98194	Check Number on line		
To Whom Paid			M	D	Y	Amount
Address			Purpose			
City		State H	Zip Code	Check Number		