

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Freinds of Debbie Dunlap</b>						
Full Name of Contributor <b>Gregory Pryor</b>				Registration Number, if PAC		
Street Address <b>5177 Sulgrave Dr.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>	
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	M <b>1</b>	D <b>0</b>	Y <b>1 7 1 5</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Citizens for Bishoff</b>				Registration Number, if PAC		
Street Address <b>545 E Town Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43125</b>	M <b>1</b>	D <b>0</b>	Y <b>2 6 1 5</b>	Amount <b>\$250.00</b>
Full Name of Contributor <b>Margie Estadt</b>				Registration Number, if PAC		
Street Address <b>692 Hunnicut Road</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>gofundme</b>	
City <b>Reynoldsburg</b>	State <b>OH</b>	Zip Code <b>43068</b>	M <b>1</b>	D <b>0</b>	Y <b>2 9 1 5</b>	Amount <b>\$18.12</b>
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State <b>OH</b>	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 <b>OH</b>	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 <b>OH</b>	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 <b>OH</b>	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 <b>OH</b>	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 also appear. [R.C. 3517.10(B)(4)]