

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Friends of Lori Ann Feibel</u>						
Full Name of Contributor <u>Laura E. Desai</u>				Registration Number, if PAC		
Street Address <u>2584 Bryden Rd</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>check</u>		
City <u>Bexley</u>	State <u>OH</u>	Zip Code <u>43209</u>	M <u>05</u>	D <u>02</u>	Y <u>13</u>	Amount <u>200.00</u>
Full Name of Contributor <u>Angela Golden</u>				Registration Number, if PAC		
Street Address <u>4036 Chelsea Green E</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>check</u>		
City <u>New Albany</u>	State <u>OH</u>	Zip Code <u>43054</u>	M <u>05</u>	D <u>02</u>	Y <u>13</u>	Amount <u>75.00</u>
Full Name of Contributor <u>Catherine F. Kauffman</u>				Registration Number, if PAC		
Street Address <u>2650 Brentwood Rd</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>check</u>		
City <u>Bexley</u>	State <u>OH</u>	Zip Code <u>43209</u>	M <u>05</u>	D <u>02</u>	Y <u>13</u>	Amount <u>75.00</u>
Full Name of Contributor <u>Shawn D. Holt</u>				Registration Number, if PAC		
Street Address <u>5061 Blackstone Edge Dr.</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>check</u>		
City <u>New Albany</u>	State <u>OH</u>	Zip Code <u>43054</u>	M <u>05</u>	D <u>02</u>	Y <u>13</u>	Amount <u>75.00</u>
Full Name of Contributor <u>Kim L. Niswander</u>				Registration Number, if PAC		
Street Address <u>2768 Cimiminson Ct.</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>check</u>		
City <u>Hilliard</u>	State <u>OH</u>	Zip Code <u>43026</u>	M <u>05</u>	D <u>02</u>	Y <u>13</u>	Amount <u>100.00</u>
Full Name of Contributor <u>Leslie N. Knott</u>				Registration Number, if PAC		
Street Address <u>190 S. Ardmore Rd.</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>check</u>		
City <u>Bexley</u>	State <u>OH</u>	Zip Code <u>43209</u>	M <u>05</u>	D <u>02</u>	Y <u>13</u>	Amount <u>150.00</u>
Full Name of Contributor <u>June K. Gutterman</u>				Registration Number, if PAC		
Street Address <u>7995 Bluefield St.</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>check</u>		
City <u>Canal Winchester</u>	State <u>OH</u>	Zip Code <u>43110</u>	M <u>05</u>	D <u>02</u>	Y <u>13</u>	Amount <u>100.00</u>
Full Name of Contributor <u>Arlene Richman</u>				Registration Number, if PAC		
Street Address <u>7995 Bluefield St.</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>check</u>		
City <u>Canal Winchester</u>	State <u>OH</u>	Zip Code <u>43110</u>	M <u>05</u>	D <u>02</u>	Y <u>13</u>	Amount <u>75.00</u>

* 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)]