

### Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Anne K. Jeffrey					Registration Number, if PAC	
Street Address 296 Ashbourne Pl			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card
City Columbus	State OH	Zip Code 43209-1449	M 04	D 07	Y 2014	Amount \$500.00
Full Name of Contributor Huntington Bancshares Inc PAC					Registration Number, if PAC C00165589	
Street Address 41 S High St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	M 06	D 17	Y 2014	Amount \$2,500.00
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 01	D 13	Y 2014	Amount \$500.00
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 06	D 20	Y 2014	Amount \$150.00
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 06	D 20	Y 2014	Amount \$500.00

\* 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)]