

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Chris Valentine							
Full Name of Contributor David N. Abood				Registration Number, if PAC			
Street Address 5301 Indian Hill Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 1	Amount \$100.00	
Full Name of Contributor Sandra L. Hauge				Registration Number, if PAC			
Street Address 7361 Earlsford Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 1	Amount \$50.00	
Full Name of Contributor Kathleen A. Whitson				Registration Number, if PAC			
Street Address 10473 Mackenzie Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 1	Amount \$100.00	
Full Name of Contributor Chris M. Valentine				Registration Number, if PAC			
Street Address 3053 Meadowsglen Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 2	Amount \$350.00	
Full Name of Contributor John M. Fairand				Registration Number, if PAC			
Street Address 5265 Muirfield Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 1	Amount \$25.00	
Full Name of Contributor Rosalia M. Deperro				Registration Number, if PAC			
Street Address 6448 Green Stone Loop		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43016	M 1	D 0	Y 1	Amount \$50.00	
Full Name of Contributor Gary G. Koch				Registration Number, if PAC			
Street Address 5381 Adventure Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 2	Amount \$50.00	
Full Name of Contributor Karen R. Schirmer				Registration Number, if PAC			
Street Address 4894 Chatelaine Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 1	Amount \$25.00	

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$750.00**