

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Redfern							
Full Name of Contributor Jodie Damron					Registration Number, if PAC		
Street Address 6299 Carolann Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00	
Full Name of Contributor Scott Brick					Registration Number, if PAC		
Street Address 6272 Carol Ann Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00	
Full Name of Contributor Brian Sass					Registration Number, if PAC		
Street Address 6219 Richard Ross Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00	
Full Name of Contributor Jeff Holdren					Registration Number, if PAC		
Street Address 6244 Marshall Bay Circle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00	
Full Name of Contributor Margaret Harne					Registration Number, if PAC		
Street Address 6172 Richard Ross Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 2	Amount 2.00	
Full Name of Contributor Susan Shepherd					Registration Number, if PAC		
Street Address 6413 Ewin Circle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00	
Full Name of Contributor Travis Ressler					Registration Number, if PAC		
Street Address 478 Scioto Meadows Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 2	Amount 2.00	
Full Name of Contributor John Nichols					Registration Number, if PAC		
Street Address 726 Scioto Meadows		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Grove City	State O H	Zip Code 43123	M 0	D 9	Y 2	Amount 1.00	

* 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)]

Page Total \$ 10.00