

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Friends of Dr Jan Corwink</i>						
Full Name of Contributor <i>Nancy Radcliff</i>				Registration Number, if PAC		
Street Address <i>126 St. Mark St.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Money Order</i>	
City <i>Brooklyn</i>	State <i>OH</i>	Zip Code <i>NY 11216</i>	M <i>05</i>	D <i>21</i>	Y <i>08</i>	Amount <i>100.00</i>
Full Name of Contributor <i>Eugene P. Corwink</i>				Registration Number, if PAC		
Street Address <i>3843 Borington Dr.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Medina</i>	State <i>OH</i>	Zip Code <i>44256</i>	M <i>05</i>	D <i>22</i>	Y <i>08</i>	Amount <i>250.00</i>
Full Name of Contributor <i>Douglas T Erickson</i>				Registration Number, if PAC		
Street Address <i>1362 Park Plaza Dr.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43213</i>	M <i>05</i>	D <i>22</i>	Y <i>08</i>	Amount <i>100.00</i>
Full Name of Contributor <i>Monica &amp; Dan Braun</i>				Registration Number, if PAC		
Street Address <i>3921 Lytham Ct.</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Upper Arlington</i>	State <i>OH</i>	Zip Code <i>43220</i>	M <i>05</i>	D <i>24</i>	Y <i>08</i>	Amount <i>100.00</i>
Full Name of Contributor <i>Lora V. Blanton</i>				Registration Number, if PAC		
Street Address <i>1910 Grand Ave</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Toledo</i>	State <i>OH</i>	Zip Code <i>43607</i>	M <i>05</i>	D <i>24</i>	Y <i>08</i>	Amount <i>50.00</i>
Full Name of Contributor <i>Randy E Corwink</i>				Registration Number, if PAC		
Street Address <i>7374 Chaddagh Lane</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Dublin</i>	State <i>OH</i>	Zip Code <i>43016</i>	M <i>05</i>	D <i>26</i>	Y <i>08</i>	Amount <i>250.00</i>
Full Name of Contributor <i>Michael F. Corwink</i>				Registration Number, if PAC		
Street Address <i>30 Poplar St</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>North East</i>	State <i>OH</i>	Zip Code <i>PA 16428</i>	M <i>05</i>	D <i>26</i>	Y <i>08</i>	Amount <i>100.00</i>
Full Name of Contributor <i>Jessie Smith-Wilson</i>				Registration Number, if PAC		
Street Address <i>185 East 163rd St. Apt 2</i>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Bronx</i>	State <i>OH</i>	Zip Code <i>NY 10451</i>	M <i>05</i>	D <i>26</i>	Y <i>08</i>	Amount <i>50.00</i>

\* 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)]