

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Friends of Dr. Jan Gorniak</i>							
Full Name of Contributor <i>Mickey Lyman</i>						Registration Number, if PAC	
Street Address <i>6519 Birchview Dr. N.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Pay Pal</i>	
City <i>Reynoldsburg</i>		State <i>OH</i>	Zip Code <i>43068</i>	M <i>06</i>	D <i>11</i>	Y <i>08</i>	Amount <i>100.00</i>
Full Name of Contributor <i>Christopher Lynch</i>						Registration Number, if PAC	
Street Address <i>29 Marginal St. E.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Brooklyn</i>		State <i>OH NY</i>	Zip Code <i>11207</i>	M <i>06</i>	D <i>30</i>	Y <i>08</i>	Amount <i>50.00</i>
Full Name of Contributor <i>Margaret R. Ashbrook</i>						Registration Number, if PAC	
Street Address <i>2994 Crescent Dr.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43204</i>	M <i>07</i>	D <i>07</i>	Y <i>08</i>	Amount <i>25.00</i>
Full Name of Contributor <i>Craig Barclay</i>						Registration Number, if PAC	
Street Address <i>3082 Elbean Ave</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43209</i>	M <i>07</i>	D <i>07</i>	Y <i>08</i>	Amount <i>100.00</i>
Full Name of Contributor <i>Susan E. Ashbrook</i>						Registration Number, if PAC	
Street Address <i>2994 Crescent Dr.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43204</i>	M <i>07</i>	D <i>09</i>	Y <i>08</i>	Amount <i>25.00</i>
Full Name of Contributor <i>Bonita Fung</i>						Registration Number, if PAC	
Street Address <i>212 South Remington</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Pay Pal</i>	
City <i>Bexley</i>		State <i>OH</i>	Zip Code <i>43209</i>	M <i>07</i>	D <i>18</i>	Y <i>08</i>	Amount <i>100.00</i>
Full Name of Contributor <i>Robert & Kristen Masterson Jacks</i>						Registration Number, if PAC	
Street Address <i>63B Harding Rd.</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Old Greenwich</i>		State <i>OH CT</i>	Zip Code <i>06870</i>	M <i>07</i>	D <i>20</i>	Y <i>08</i>	Amount <i>100.00</i>
Full Name of Contributor <i>David L Cummin M.D.</i>						Registration Number, if PAC	
Street Address <i>P.O. Box 917</i>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <i>Check</i>	
City <i>Logan</i>		State <i>OH</i>	Zip Code <i>43138</i>	M <i>07</i>	D <i>22</i>	Y <i>08</i>	Amount <i>100.00</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)]