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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full									
Citizens for Dorrian Committee				D			6		
Il Name of Contributor			Registration Number, if PAC PAC # LA1212						
United Assoc. of Journeymen & Appre				PA	C # L			To a second	
Street Address	Employer/O	ccupa	tion/Labor Organization*				Form (Cash, Che	ck, etc.)	
1250 Kinnear Rd.	C+-+-		7:- 0-1-	T 34	1 5		Check		
City Columbus	State	Н	Zip Code 43212	M	1 2	9 0 5	Amount	250.00	
Full Name of Contributor			40212		1 ∠ ition Numl		Ĺ	250.00	
Donald B. Shackelford				Rogistiz	ition Ivain	oci, ii i A			
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)					
21 E. State St.	1	Fifth Third Bank				Check			
City	State		Zip Code	М	D	Y	Amount		
Columbus	1 .	Н	43215	1 .	1 3	0 5	7 dilouit	200.00	
Full Name of Contributor			10210		tion Num		C	200.00	
Shoemaker, Howarth & Taylor, LLP				region.	inon i vann	001, 11 1 1 1	.0		
Street Address	Employer/O	ccuna	tion/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)		
471 E. Broad St, Suite 2001	Attor						Check		
City	State		Zip Code	M D Y			Amount		
Columbus		Н	43215	0 9	I .	0 5		100.00	
Full Name of Contributor	1 0		10210		ation Num		.C	100.00	
Gregory Comfort						,			
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
2275 Onandaga Dr.	EMH				Chec			, ,	
City	State		Zip Code	М	D	Y	Amount		
Columbus	1	H	43221	0 9	$ _{1 4}$	0 5		100.00	
Full Name of Contributor			10		ation Num		.C	200.00	
Thomas L. Kaplin									
Street Address	Employer/C	Оссира	ntion/Labor Organization*				Form (Cash, Che	ck, etc.)	
207 E. Deshler Ave.	Attor	nev	7				Check		
City	State		Zip Code	М	D	Y	Amount		
Columbus	0	Η	43206	0 9	1 4	0 5	•	200.00	
Full Name of Contributor				Registra	ation Num		C		
Robert Lazarus, Jr.									
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)					
2094 Pack Hill Dr	N/A				Check				
City	State		Zip Code	М	D	Y	Amount		
Columbus	0	Н	43209	0 9	1 5	0 5		200.00	
Full Name of Contributor					ation Num				
Teamsters Local Union No. 413				LA	.766				
Street Address	Employer/C)ccupa	ation/Labor Organization*			-	Form (Cash, Che	ck, etc.)	
555 E. Rich St.							Check		
City	State		Zip Code	М	D	Y	Amount		
Columbus	0	Н	43215	0 9	1 5	0 5		150.00	
Full Name of Contributor Registration Number, if PAC									
Richard C. Pfeiffer, Jr.									
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
238 E. Royal Forest Blvd.	City of Columbus		· · · · · · · · · · · · · · · · · · ·	- ₁	,	Check			
City	State		Zip Code	M	D	Y	Amount	400.00	
Columbus	O	Н	43214	0 9	1 5	0 5	I	100.00	

Page Total \$	1,300.00
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^{*} 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)]