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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Friends of John O'Grady Committee Full Name of Contributor			Registr	ation Non	oher if P/	VC:	
	Registration Not General Contributions-See attached spreadsheet				1001, 11 17	10.	
Street Address	**************	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	Тр	Υ	Amount	
Спу	State	Zip Code	141		1	5,435.44	
Full Name of Contributor			Registr	ation Nun	iber, if P/		
Contributions from form 31E (10/2/08)						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
City	State	Zip Code	Тм	Ιр	Гу	Amount	
			1	-	•	35.00	
Full Name of Contributor	ame of Contributor Registration Number, if P.						
Contributions from form 31E (10/21/0	8)						
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
						9,050.00	
Full Name of Contributor			Registra	ation Nun	iber, if P/	Accessor and the contract of t	
Contributions from form 31E (10/22/0	8)						
Full Name of Contributor Contributions from form 31E (10/22/0 Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Ашоши	
						1,747.00	
Full Name of Contributor Registration Number, if PAC							
Contributions from form 31E (10/23/08)							
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount	
						1,905.00	
Full Name of Contributor			Registra	ation Nun	iber, if PA		
Contributions from form 31E (10/27/08-Cleveland)							
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Ϋ́	Amount	
						2,600.00	
Full Name of Contributor			Registra	ation Nun	iber, if PA	,C	
Contributions from form 31E (10/27/0	The same of the sa				Tr/60165T0000000000000000000000000000000000		
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount	
						2,300.00	
Full Name of Contributor Contributions from form 31E (10/29/08) Registration Number, if PAC							
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				Form (Cash, Check, etc.)		
						\$4.000000000000000000000000000000000000	
City	State	Zip Code	М	D	Υ	Amount	
						425.00	

Page Total \$	23,497.44

^{*} 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)]