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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Citizens for Dorrian Committee							
Full Name of Contributor				Registration Number, if PAC			
Contributors in Officeholder's Employ 31G				Togalianon Tumbor, n TTO			
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 75.00	
Full Name of Contributor	Registration Number, if P						
Fund Raiser Event 10/25/2009 Form Attached							
Street Address						Form (Cash, Check, etc.)	
		Ü				, , , ,	
City	State	Zip Code	М	D	Y	Amount	
	# 1					1,800.00	
Full Name of Contributor			Registra	ition Nur	ber, if PA	Control of the Contro	
Murali Ramalingam							
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Check, etc.)	
7426 Mapleleaf Blvd						Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	O H	43235	1 1			500.00	
Full Name of Contributor			Registra	ition Nun	ber, if PA	vC	
Ajith Balaratnarajah							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
7444 Murrayfield Dr City	State	Zip Code	M	D	Y	Check Amount	
Worthington	O H	43085	$\begin{vmatrix} M \\ 1 \end{vmatrix} 1$				
Full Name of Contributor		1 43003	areas because we will always the same				
George McCue Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
4598 Bridle Path Ln	Employer overpation Education				Check		
City	State	Zip Code	М	D	Y	Amount	
Dublin	OH	43017	1 1	0 2	0 9	150.00	
Full Name of Contributor			CONTRACTOR AND ADDRESS OF THE PARTY OF THE P	CONTRACTOR OF THE PARTY OF THE	ber, if PA	English and the second	
Ranjan Manoranjan							
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)	
344 Cramer Creek Ct						Check	
City	State	Zip Code	М	D	Y	Amount	
Dublin	$O \mid H$	43017	1 1	0 2	0 9	250.00	
Full Name of Contributor			Registra	ition Nun	ber, if PA	VC .	
Suguneswaran Suguness	γ						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
4340 Manor Ct		Ta: 0.1	1 3.6	1 5	1 77	Check	
City	State H	Zip Code	M	D	Y	Amount	
Dublin Full Name of Contributor		43017	1 1	0 2		250.00	
Full Name of Contributor Registration Number, if PAC							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
Cit.	C+-+-	Zin Code	1 34	T 5	1 37	A	
City	State	Zip Code	M	D	Y	Amount	
					1		

Page Total \$ 3,525.00

<sup>\*</sup> 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)]