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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

				· · · · · · · · · · · · · · · · · · ·	02502200000000000	ENGLISH OF COMPANY OF COMPANY OF COMPANY		
Name of Committee in Full								
Citizens for Julie L. Dorrian								
Full Name of Contributor			Registra	tion Num	ber, if PA	С		
Sandra McIntosh								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
2453 Limestone Way	Freund Freeze & Arnold					Check		
City	State	Zip Code	М	D	Y	Amount		
Columbus	OH	43228	0 2	1 1	0 9		250.00	
Full Name of Contributor			Registra	tion Num	ber, if PA	С		
Stephen C. Findley								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
5738 Ennishannon Place	Freund	Freund Freeze & Arnold					Check	
City	State	Zip Code	М	D	Y	Amount		
Dublin	OH	43016	0 2	1 2	0 9		250.00	
Full Name of Contributor					ber, if PA	.C		
Vorys Sater Seymour and Pease LL	P		OH	I109				
Street Address		pation/Labor Organization*				Form (Cash, C	heck, etc.)	
52 E. Gay Street						Check		
City	State	Zip Code	M	D	Y	Amount		
Columbus	OH	43215	0 2	1 2	0 9		500.00	
Full Name of Contributor					ber, if PA			
Kagay, Albert, Diehl & Groeber								
Street Address	Employer/Occi	pation/Labor Organization*				Form (Cash, C	heck, etc.)	
						Check		
6877 N. High Street, Suite 300	State	Zip Code	М	D	Y	Amount	···	
	OH	43085	0 1	2 6	1	B	250.00	
Worthington Full Name of Contributor	I OII	1 40000	NAMES OF TAXABLE PARTY.		ber, if PA	A STATE OF THE PARTY OF THE PAR	200.00	
<b>3</b>					,			
Shawn R. Dominy Street Address	Employer/Occ	ipation/Labor Organization*		National Company		Form (Cash, C	heck etc.)	
	I	ey at Law				Check	, ,	
3837 Attucks Drive	State	Zip Code	М	D	Y	Amount		
City	OH	43065	0 1		1 .	H .	250.00	
Powell Full Name of Contributor	OII	1 43003			ber, if PA		200.00	
	1 Action Com	mittaa	B -	1821	1001, 11 1 1	.0		
Bricker & Eckler LLP State Politica		upation/Labor Organization*		1041		Form (Cash, C	heck etc.)	
Street Address	Employer/Occi	upation/babor Organization				Check	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
100 S. Third Street	State	7in Code	М	D	ΤΥ	Amount		
City	State	Zip Code 43215				8	500.00	
Columbus	OH	43213			0 9 nber, if PA		200.00	
Full Name of Contributor			Kegisii	ation ivun	ioci, ii i z	10		
Frederick J. Simon						E (C1 (	Therefore to	
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
75 E. Wilson Bridge Road		ey at Law	1 57	1 5	1 37	Check		
City	State	Zip Code	M	D	Y	Amount	250.00	
Worthington	OH	43085	0 1	ment contraction that has been been been been been been been bee			250.00	
Full Name of Contributor			Registr	ation Nun	nber, if PA	4C		
Mark Corna						.n. /o		
Street Address	1 ' '	upation/Labor Organization*				Form (Cash, C		
19153 Chelton Wood		Kokosing			1	Check		
City	State	Zip Code	M	D	Y	Amount	050.00	
Powell	OH	43065	0 1	116	0 9		250.00	

Page Total \$ 2,500.00

<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)]