

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full McClellan For UA Schools									
Full Name of Contributor Bob Derick						Registration Number, if PAC			
Street Address 2181 Waltham			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 1		D 0	
						Y 0		Amount \$100.00	
Full Name of Contributor Robert Dunn						Registration Number, if PAC			
Street Address 1764 Edgemont Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43212		M 1		D 0	
						Y 0		Amount \$50.00	
Full Name of Contributor Peter Edwards, Jr.						Registration Number, if PAC			
Street Address 2375 Tremont Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 0		D 9	
						Y 2		Amount \$75.00	
Full Name of Contributor Tim Farber						Registration Number, if PAC			
Street Address 1975 Wickford Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 0		D 9	
						Y 0		Amount \$50.00	
Full Name of Contributor Steve Frame						Registration Number, if PAC			
Street Address 2035 Andover Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43212		M 1		D 0	
						Y 0		Amount \$50.00	
Full Name of Contributor Paul Fry						Registration Number, if PAC			
Street Address 1321 Carron Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M 0		D 9	
						Y 0		Amount \$100.00	
Full Name of Contributor Mark Galantowicz						Registration Number, if PAC			
Street Address 2610 Slate Run Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M 1		D 0	
						Y 0		Amount \$200.00	
Full Name of Contributor Herb Gillen						Registration Number, if PAC			
Street Address 2224 Dorset Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Upper Arlington		State OH		Zip Code 43221		M 0		D 9	
						Y 0		Amount \$100.00	

* 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)]

Page Total **\$725.00**