

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee to Re-elect Keegan							
Full Name of Contributor Marc Schare					Registration Number, if PAC		
Street Address 2113 Selbourne Ct		Employer/Occupation/Labor Organization* Self employed			Form (Cash, Check, etc.) check		
City Dublin	State O	Zip Code h 43016	M 1	D 1	Y 0	Amount 100.00	
Full Name of Contributor Worthington Republican Women					Registration Number, if PAC		
Street Address 6650 Allister Wav		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O	Zip Code H 43235	M 1	D 0	Y 3	Amount 25.00	
Full Name of Contributor John A. Butterfield					Registration Number, if PAC		
Street Address 6781 Thorne St.		Employer/Occupation/Labor Organization* Whalen & Co CPAs			Form (Cash, Check, etc.) check		
City Worthington	State O	Zip Code H 43085	M 1	D 0	Y 3	Amount 25.00	
Full Name of Contributor Frank E White					Registration Number, if PAC		
Street Address 6659 Lakeside Circle E		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) check		
City Worthington	State O	Zip Code H 43085	M 1	D 0	Y 2	Amount 50.00	
Full Name of Contributor Julie D. Keegan					Registration Number, if PAC		
Street Address 6675 Lakeside Cir W		Employer/Occupation/Labor Organization* Homemaker			Form (Cash, Check, etc.) check		
City Worthington	State O	Zip Code H 43085	M 1	D 1	Y 3	Amount 511.20	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]