

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full McClellan for UA Schools									
Full Name of Contributor Gregory L. Hall						Registration Number, if PAC			
Street Address 12006 Miller Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Johnstown		State OH	Zip Code 43031		M 1	D 1	Y 0	Y 5	Amount \$100.00
Full Name of Contributor Stivers for Congress						Registration Number, if PAC			
Street Address 4679 Winterset Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43220		M 1	D 0	Y 3	Y 0	Amount \$250.00
Full Name of Contributor Jeffrey H. Sopp						Registration Number, if PAC			
Street Address 300 West Spring Street, Unit 702			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43215		M 1	D 0	Y 3	Y 1	Amount \$500.00
Full Name of Contributor Chad Delligatti						Registration Number, if PAC			
Street Address 8108 Harriott Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Dublin		State OH	Zip Code 43017		M 1	D 0	Y 2	Y 1	Amount \$250.00
Full Name of Contributor Diane Marie Koontz						Registration Number, if PAC			
Street Address 2675 Henthorn Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Upper Arlington		State OH	Zip Code 43221		M 1	D 0	Y 1	Y 6	Amount \$100.00
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City		State OH	Zip Code		M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City		State OH	Zip Code		M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City		State OH	Zip Code		M	D	Y	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 also appear. [R.C. 3517.10(B)(4)]