

FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NO.	ADDRESS	CITY	STATE	ZIP	FORM	DATE OF CONTRIBUTION	AMOUNT	OCCUPATION	EMPLOYER
John	J	Manning				204 Reinhard Ave	Columbus	OH	43206	Check	4/20/2005	35.00	REQUESTED	REQUESTED
												35.00		

35.00