

## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of O'Connor							
Full Name of Contributor Citizens for Bishoff						Registration Number, if PAC	
Street Address 545 E Town St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43215-4801	M 11	D 03	Y 15	Amount \$500.00
Full Name of Contributor Citizens to Elect Mike Schadek						Registration Number, if PAC	
Street Address 1537 Guilford Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43221-3850	M 09	D 29	Y 15	Amount \$100.00
Full Name of Contributor John Cummings						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M 07	D 01	Y 15	Amount \$20.00
Full Name of Contributor John Cummings						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City		State	Zip Code	M 01	D 28	Y 16	Amount \$30.00
Full Name of Contributor Michael Curtin						Registration Number, if PAC	
Street Address 1370 Cambridge Blvd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Columbus		State OH	Zip Code 43212-3207	M 11	D 21	Y 15	Amount \$100.00
Full Name of Contributor Michalea Delaveris						Registration Number, if PAC	
Street Address 1164 Perry St			Employer/Occupation/Labor Organization* BakerHostetler, LLP Attorney			Form (Cash, Check, etc.)	
City Columbus		State OH	Zip Code 43201-3344	M 09	D 03	Y 15	Amount \$250.00
Full Name of Contributor Paula Deming						Registration Number, if PAC	
Street Address 6775 Alloway St W			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card	
City Worthington		State OH	Zip Code 43085-2503	M 01	D 23	Y 16	Amount \$100.00
Full Name of Contributor Bill DeMora						Registration Number, if PAC	
Street Address 100 Warren St			Employer/Occupation/Labor Organization* Strategies Unlimited Political Consultant			Form (Cash, Check, etc.) Credit Card	
City Columbus		State OH	Zip Code 43215-1567	M 01	D 28	Y 16	Amount \$250.00

\* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$1,350.00