

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full COMMITTEE TO ELECT JAMES MCGREGOR					
Full Name of Contributor DONALD HOLLISTER				Registration Number, if PAC	
Street Address PO BOX 740		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK	
City YELLOW SPRINGS	State OH	Zip Code 45387	M 0	D 4	Y 0 8 1 1
				Amount \$25.00	
Full Name of Contributor COMMITTEE FOR JIM HUGHES				Registration Number, if PAC	
Street Address 52 EAST GAY STREET		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State OH	Zip Code 43215	M 0	D 6	Y 0 2 1 1
				Amount \$1,000.00	
Full Name of Contributor MICHAEL CARDER				Registration Number, if PAC	
Street Address 132 N. HIGH ST.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK	
City GAHANNA	State OH	Zip Code 43230	M 0	D 4	Y 1 4 1 1
				Amount \$50.00	
Full Name of Contributor WILLIAM LOZIER				Registration Number, if PAC	
Street Address 14 BENDING OAK DR.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) CHECK	
City GRANVILLE	State OH	Zip Code 43023	M 0	D 4	Y 1 9 1 1
				Amount \$50.00	
Full Name of Contributor TIMOTHY PACK				Registration Number, if PAC	
Street Address 1019 RIDGE CREST DR.		Employer/Occupation/Labor Organization* PILOT		Form (Cash, Check, etc.) CHECK	
City GAHANNA	State OH	Zip Code 43230	M 0	D 6	Y 0 6 1 1
				Amount \$200.00	
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
				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
				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
				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)]

Page Total **\$1,325.00**