

Statement of Contributions Received

Prescribed by Secretary of State 3/05

| | | | | | | | |
|---|-----------------------|--|---------------|---------------|--|-------------------------|--|
| Name of Committee in Full Committee to Elect James C. Ragland | | | | | | | |
| Full Name of Contributor Mekelle E Armstrong | | | | | Registration Number, if PAC | | |
| Street Address P. O. Box 13757 | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | State O H | Zip Code 43213 | M 1 | D 0 | Y 2 | Amount 50.00 | |
| Full Name of Contributor Citizens for Priscilla Tyson | | | | | Registration Number, if PAC | | |
| Street Address 1465 East Broad Street | | Employer/Occupation/Labor Organization* Campaign to Campaign | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | State O H | Zip Code 43205 | M 0 | D 9 | Y 2 | Amount 100.00 | |
| Full Name of Contributor Harry Pukay-Martin | | | | | Registration Number, if PAC | | |
| Street Address 987 Clan Court | | Employer/Occupation/Labor Organization* OSU Pathology / CFO | | | Form (Cash, Check, etc.) Check | | |
| City Worthington | State O H | Zip Code 43085 | M 1 | D 0 | Y 1 | Amount 250.00 | |
| Full Name of Contributor Charlene E. Greene | | | | | Registration Number, if PAC | | |
| Street Address 1599 E. Gates Street | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | State O H | Zip Code 43206 | M 0 | D 9 | Y 3 | Amount 50.00 | |
| Full Name of Contributor Citizens for Tavares | | | | | Registration Number, if PAC | | |
| Street Address 5632 Farms Drive | | Employer/Occupation/Labor Organization* Campaign to Campaign | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | State O H | Zip Code 43213 | M 0 | D 9 | Y 3 | Amount 250.00 | |
| Full Name of Contributor Ceola Garrett | | | | | Registration Number, if PAC | | |
| Street Address 205 Woodland Avenue | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | State O H | Zip Code 43203 | M 1 | D 0 | Y 5 | Amount 40.00 | |
| Full Name of Contributor David Sawyer | | | | | Registration Number, if PAC | | |
| Street Address 8450 Sealeyham Drive | | Employer/Occupation/Labor Organization* City of Columbus / Fire Department | | | Form (Cash, Check, etc.) Cash | | |
| City Reynoldsburg | State O H | Zip Code 43068 | M 1 | D 0 | Y 6 | Amount 40.00 | |
| Full Name of Contributor Contributions received \$25 or less | | | | | Registration Number, if PAC | | |
| Street Address | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Cash | | |
| City | State O H | Zip Code | M 1 | D 0 | Y 5 | Amount 195.00 | |

* 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)]