

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full DOUG JOSEPH ELECTION FUND							
Full Name of Contributor COMMITTEE TO ELECT JOHN ADAMS						Registration Number, if PAC	
Street Address 1509 BON AIR CIRCLE		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK	
City SIDNEY	State O H	Zip Code 45365	M 0 6	D 1 4	Y 1 1	Amount 1,500.00	
Full Name of Contributor OHIO PRO-LIFE PAC						Registration Number, if PAC OH601	
Street Address 1634 GREENWAY RD SE		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK	
City NORTH CANTON	State O H	Zip Code 44709	M 0 7	D 1 4	Y 1 1	Amount 200.00	
Full Name of Contributor COMMITTEE TO ELECT JOHN ADAMS						Registration Number, if PAC	
Street Address 1509 BON AIR CIRCLE		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK	
City SIDNEY	State O H	Zip Code 45365	M 0 7	D 1 8	Y 1 1	Amount 1,500.00	
Full Name of Contributor COMMITTEE TO ELECT JOHN ADAMS						Registration Number, if PAC	
Street Address 1509 BON AIR CIRCLE		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK	
City SIDNEY	State O H	Zip Code 45365	M 0 9	D 0 1	Y 1 1	Amount 1,000.00	
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	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	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	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	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 4,200.00