

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Jim Rancik for Trustee							
Full Name of Contributor Jones Building and Rental Acct. Patricia L. Jones				Registration Number, if PAC #		Form (Cash, Check, etc.) CHK	
Street Address 350 Frank Rd		Employer/Occupation/Labor Organization*		City Columbus		State OH	
Zip Code 43207-2423		M 0		D 7		Y 08	
Amount 500.		Y 13		Registration Number, if PAC #CP119A		Form (Cash, Check, etc.) chk	
Full Name of Contributor Shelly PAC				Registration Number, if PAC #		Form (Cash, Check, etc.) chk	
Street Address 65 E. State Street		Employer/Occupation/Labor Organization*		City Columbus		State OH	
Zip Code 43215		M 0		D 8		Y 02	
Amount 1,000		Y 13		Registration Number, if PAC #		Form (Cash, Check, etc.) chk	
Full Name of Contributor JAMES D. Herlihy				Registration Number, if PAC #		Form (Cash, Check, etc.) chk	
Street Address 1899 W. 3rd Ave		Employer/Occupation/Labor Organization*		City Columbus		State OH	
Zip Code 43212		M 0		D 8		Y 16	
Amount 100		Y 13		Registration Number, if PAC #		Form (Cash, Check, etc.) chk	
Full Name of Contributor Kenneth W. Holloman				Registration Number, if PAC #		Form (Cash, Check, etc.) chk	
Street Address 697 Crossing Creeks		Employer/Occupation/Labor Organization*		City GAHANNA		State OH	
Zip Code 43230		M 0		D 8		Y 14	
Amount 500		Y 13		Registration Number, if PAC #		Form (Cash, Check, etc.) chk	
Full Name of Contributor				Registration Number, if PAC		Form (Cash, Check, etc.)	
Street Address		Employer/Occupation/Labor Organization*		City		State	
Zip Code		M		D		Y	
Amount		Y		Registration Number, if PAC		Form (Cash, Check, etc.)	
Street Address		Employer/Occupation/Labor Organization*		City		State	
Zip Code		M		D		Y	
Amount		Y		Registration Number, if PAC		Form (Cash, Check, etc.)	
Street Address		Employer/Occupation/Labor Organization*		City		State	
Zip Code		M		D		Y	
Amount		Y		Registration Number, if PAC		Form (Cash, Check, etc.)	

3474

2100

* 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 employers contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear (P.C. 3317.10-4)