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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full	•								
Maryellen O'Shaughnessy Com	mittee								
Full Name of Contributor				Registration Number, if PAC					
Andrew Showe									
Street Address	Employer/Occ	upation/Labor Organization	on*			Form (Cash, Check, etc.)			
45 North Front Street						Check			
City	State	Zip Code	М	D	Y	Amount			
Columbus	0 Н	43215	0 2	0 2	0 8	250.00			
Full Name of Contributor					Registration Number, if PAC				
Street Address	Employer/Occ	on*			Form (Cash, Check, etc.)				
City	State	Zip Code	М	D	Y	Amount			
				1					
Full Name of Contributor					Registration Number, if PAC				
Street Address	Employer/Occ	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
		, , , , , , , , , , , , , , , , , , , ,							
City	State	Zip Code	М	D	Y	Amount			
Full Name of Contributor			Regist	ration Nu	mber, if F	PAC			
Street Address Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)				
City	State	Zip Code	M	D I	Y	Amount			
Full Name of Contributor			Domina	ration Nu	mbor if F				
Full Name of Contributor			Regist	I a CIOII NU	mber, ii r	AC			
Street Address	Employer/Occ	on*	Form (Cash, Check, etc.)						
City	State	Zip Code	M	T D	ΙΥ	Amount			
Full Name of Contributor			Regist	ration Nu	mber, if F	PAC			
Street Address	Employer/Occ	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
City	State	Zip Code	Гм	T D	ΙΥ	Amount			
City	Julia	Zip code	"		1 i	Amount			
Full Name of Contributor			Pegist	ration Nu	mher if F	200			
Pull Name of Contributor			Regist	ration Nu	111061, 11 1	AC			
Street Address	Employer/Occ	on*	Form (Cash, Check, etc.)						
City	State	Zip Code	M 	D	Y 	Amount			
Full Name of Contributor Registration Number, if						PAC			
reet Address Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)			
Street Address	Employer/Occ	OII			r orm (Cash, Check, etc.)				
City	State	Zip Code	М	D	Y	Amount			
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* 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 \$ 250.00